2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000061968

Entity Name: VANDEMARK ASSOCIATES, INC.

FILED Jan 10, 2006 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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2300 E GRAVES AVE
SUITE C
ORANGE CITY, FL 32763

1516 ARROWHEAD TRAIL
SUITE B
ENTERPRISE, FL 32725

Current Mailing Address: New Mailing Address:

2300 E GRAVES AVE 1516 ARROWHEAD TRAIL SUITE C SUITE B ENTERPRISE, FL 32725

FEI Number: 59-3457579 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

VANDEMARK, PHYLLIS
2300 E GRAVES AVE
#481
ORANGE CITY, FL 32763 US

VANDEMARK, PHYLLIS
1516 ARROWHEAD TRAIL
ENTERPRISE, FL 32725 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: 01/10/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 DP () Delete
 Title:
 DP (X) Change () Addition

 Name:
 VANDEMARK, PHYLLIS
 Name:
 VANDEMARK, PHYLLIS

 Address:
 2300 E GRAVES AVE, # 481
 Address:
 1516 ARROWHEAD TRAIL

 City-St-Zip:
 ORANGE CITY, FL 32763
 City-St-Zip:
 ENTERPRISE, FL 32725

Title: DST () Delete Title: DST (X) Change () Addition Name: VANDEMARK, DON Name: VANDEMARK, DON

Name:VANDEMARK, DONName:VANDEMARK, DONAddress:2300 E GRAVES AVE, # 481Address:1516 ARROWHEAD TRAILCity-St-Zip:ORANGE CITY, FL 32763City-St-Zip:ENTERPRISE, FL 32725

Title: () Delete Title: DVP () Change (X) Addition

 Name:
 Name:
 VANDEMARK, DON

 Address:
 Address:
 1516 ARROWHEAD TRAIL

 City-St-Zip:
 City-St-Zip:
 ENTERPRISE, FL 32725

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PHYLLIS D. VANDEMARK PRES 01/10/2006