2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000091892

Entity Name: ASSOCIATES UNLIMITED, INC.

Current Principal Place of Business:	**New Principal Place of Business:**
3105 W. WATERS AVE., #109A TAMPA, FL 33614	3105 W. WATERS AVE., #109A SUITE212 TAMPA, FL 33614
Current Mailing Address:	**New Mailing Address:**
3105 W. WATERS AVE., #109A TAMPA, FL 33614	3105 W. WATERS AVE., #109A SUITE212 TAMPA, FL 33614

FEI Number: 59-3540072   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:**
MESSINEO, CHRISTINA 8905 ANNA MARIA WAY ODESSA, FL 33556 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: _____

    Electronic Signature of Registered Agent   Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title:	COO ( ) Delete	Title:	( ) Change ( ) Addition
Name:	MESSINEO, ROBERT	Name:	
Address:	8905 ANNA MARIA WAY	Address:	
City-St-Zip:	ODESSA, FL 33556	City-St-Zip:	
Title:	P ( ) Delete	Title:	( ) Change ( ) Addition
Name:	MESSINEO, CHRISTINA	Name:	
Address:	8905 ANNA MARIA WAY	Address:	
City-St-Zip:	ODESSA, FL 33556	City-St-Zip:	

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: ROBERT MESSINEO   COO   04/25/2006

    Electronic Signature of Signing Officer or Director   Date