

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000068878

FILED  
Mar 10, 2009  
Secretary of State

Entity Name: SPECIAL ASSET MANAGEMENT, INC.

## Current Principal Place of Business:

710 OAKFIELD DRIVE  
BRANDON, FL 33511

## New Principal Place of Business:

422 S. KINGS AVE.  
BRANDON, FL 33511

## Current Mailing Address:

P.O. BOX 874  
BRANDON, FL 33509

## New Mailing Address:

FEI Number: 59-3591088

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ORY, RONNIE J  
307 BLOOMINGFIELD DR  
BRANDON, FL 33511 US

## Name and Address of New Registered Agent:

ORY, RONNIE J  
131 HICKORY CREEK DR  
BRANDON, FL 33511 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:

03/10/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VD ( ) Delete  
Name: ORY, LINDA  
Address: 307 BLOOMINGFIELD DR  
City-St-Zip: BRANDON, FL 33511

Title: VTD ( ) Delete  
Name: ORY, RONNIE J  
Address: 307 BLOOMINGFIELD DR  
City-St-Zip: BRANDON, FL 33511

Title: PD ( ) Delete  
Name: ORY, BRETT A  
Address: 108 WILDOAK DR.  
City-St-Zip: BRANDON, FL 33511

Title: VD ( ) Delete  
Name: WILLIAMS, RHONDA O  
Address: 420 VAN REED MANOR DR  
City-St-Zip: BRANDON, FL 33511

Title: VSD ( ) Delete  
Name: ORY, RONALD J  
Address: 118 HOLLY DR  
City-St-Zip: LA PLACE, LA 70068

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change ( ) Addition  
Name: ORY, LINDA  
Address: 131 HICKORY CREEK DR  
City-St-Zip: BRANDON, FL 33511

Title: VTD (X) Change ( ) Addition  
Name: ORY, RONNIE J  
Address: 131 HICKORY CREEK DR  
City-St-Zip: BRANDON, FL 33511

Title: PD (X) Change ( ) Addition  
Name: ORY, BRETT A  
Address: 4852 RAMBLING RIVER RD  
City-St-Zip: BRANDON, FL 33511

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: BRETT ORY

P

03/10/2009

Electronic Signature of Signing Officer or Director

Date