

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V34994

Entity Name: A.S.A. MFG. INC.

FILED
Apr 04, 2008
Secretary of State

Current Principal Place of Business:

14879 111TH ST.
DUNNELLON, FL 34432 US

New Principal Place of Business:

Current Mailing Address:

14879 SW 111TH STREET
DUNNELLON, FL 34432 US

New Mailing Address:

14879 111TH ST.
DUNNELLON, FL 34432 US

FEI Number: 59-3134996

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ZUNICH, JULIE
4436 SW DRIFTWOOD CT
DUNNELLON, FL 34431 US

Name and Address of New Registered Agent:

DUPLESSIS, JOHN TODD
5383 SE 44TH CIRCLE
OCALA, FL 34480 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: JOHN TODD DUPLESSIS

04/04/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DUPLESSIS, JACK,
Address: 9117 SW 193 RD CIRCLE
City-St-Zip: DUNNELLON, FL 34432

Title: P () Delete
Name: DUPLESSIS, TODD
Address: 5383 SE 44TH CIRCLE
City-St-Zip: OCALA, FL 34480

Title: VP () Delete
Name: DUPLESSIS, JACK
Address: 9117 SW 193RD CIRCLE
City-St-Zip: DUNNELLON, FL 33432

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change () Addition
Name: DUPLESSIS, JOHN TODD
Address: 5383 SE 44TH CIRCLE
City-St-Zip: OCALA, FL 34480

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

Title: S () Change (X) Addition
Name: DUPLESSIS, SUSAN
Address: 5383 SE 44TH CIRCLE
City-St-Zip: OCALA, FL 34480

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: JOHN TODD DUPLESSIS

P

04/04/2008

Electronic Signature of Signing Officer or Director

Date