

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 481753

**FILED**  
**Jan 23, 2009**  
**Secretary of State**

**Entity Name:** TALMAR ASSOCIATES, INC.

**Current Principal Place of Business:**

4713 NW 75TH PLACE  
POMPANO BEACH, FL 33073 US

**New Principal Place of Business:**

P. O. BOX 114  
GRANT, FL 32949 US

**Current Mailing Address:**

4713 NW 75TH PLACE  
POMPANO BEACH, FL 33073 US

**New Mailing Address:**

P. O. BOX 114  
GRANT, FL 32949 US

**FEI Number:** 59-1610694

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FOSTER, TALITHA L  
4713 NW 75TH PLACE  
COCONUT CREEK, FL 33073 US

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

FOSTER, TALITHA L  
P. O. BOX 114  
GRANT, FL 32949 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

01/23/2009

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: EVPT ( ) Delete  
Name: GARLATI, WILLIAM C,  
Address: 131 GLENEAGLES RD  
City-St-Zip: CAMPOBELLO, SC 29322 US

Title: PS ( ) Delete  
Name: GARLATI, MARILYN,  
Address: 131 GREENEAGLES RD  
City-St-Zip: CAMPOBELLO, SC 29322 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: MARILYN A. GARLATI

Electronic Signature of Signing Officer or Director

PRES

01/23/2009

Date