

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000000662

FILED
May 13, 2008
Secretary of State

Entity Name: EASTERN TECHNICAL ASSOCIATES, INC.

Current Principal Place of Business:

3302 ANVIL PLACE
RALEIGH, NC 27603

New Principal Place of Business:

Current Mailing Address:

PO BOX 1009
GARNER, NC 275291009

New Mailing Address:

FEI Number: 56-1236541 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROSE, H T
1017 AUGUSTA DRIVE
SUN CITY CENTER, FL 33573 US

Name and Address of New Registered Agent:

ROSE, H T
758 CORTARO DR
THE BENTON HOUSE
SUN CITY CENTER, FL 33573 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: _____ 05/13/2008
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROSE, TOM
Address: 2116 OAKTON DR.
City-St-Zip: RALEIGH, NC 27603

Title: VS () Delete
Name: ROSE, PATRICIA S
Address: 2116 OAKTON DR.
City-St-Zip: RALEIGH, NC 27603

Title: T () Delete
Name: ROSE, T. PATRICK
Address: 2116 OAKTON DR.
City-St-Zip: RALEIGH, NC 27603

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: ROSE, PATRICIA S
Address: 2116 OAKTON DR.
City-St-Zip: RALEIGH, NC 27603

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: SHERRI H. SIGWORTH OM 05/13/2008
Electronic Signature of Signing Officer or Director Date