



08032228

UNITED STATES
SECURITIES AND
EXCHANGE COMMISSION
Washington, D.C. 20549

FORM TA-1

OMB Approval	
OMB Number:	3235-0084
Expires:	June 30, 2009
Estimated average burden hours per response	2.00

UNIFORM FORM FOR REGISTRATION AS A TRANSFER AGENT AND FOR AMENDMENT TO REGISTRATION PURSUANT TO SECTION 17A OF THE SECURITIES EXCHANGE ACT OF 1934

Form TA-1 is to be used to register or amend registration as a transfer agent with the Comptroller of the Currency, the Board of Governors of the Federal Reserve System, the Federal Deposit Insurance Corporation or the Securities and Exchange Commission pursuant to Section 17A of the Securities Exchange Act of 1934.

Read all instructions before completing this form. Please print or type all responses.

PROCESSED

SEP 05 2008

THOMSON REUTERS

Form Version: 1.0.0

Check to show blank form for printing

1(a). Filer CIK: 1(b). Filer CCC:

1(c). Live/Test Filing? Live Test

1(d). Return Copy Yes

1(e). Is this filing an amendment to a previous filing? Yes

1(e)(i). File Number: 084-

1(f)(i). Contact Name: 1(f)(ii). Contact Phone Number:

1(f)(iii). Contact E-mail Address:

SECURITIES AND EXCHANGE COMMISSION
RECEIVED
SEP 02 2008
BRANCH OF REGISTRATIONS AND EXAMINATIONS
02

SEC 1528 (1-08)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Handwritten initials and marks on the right side of the page.

1(g). Notification E-mail Address:

ASTRANSFER@HOTMAIL.COM

2. Appropriate regulatory agency (check one):

- Securities and Exchange Commission
- Board of Governors of the Federal Reserve System
- Federal Deposit Insurance Corporation
- Comptroller of the Currency

3(a). Full Name of Registrant:

AFFILIATED STOCK TRANSFER COMPANY

3(a)(i). Previous name, if being amended:

3(b). Financial Industry

Number Standard (FINS) 409 722
number:

3(c). Address of principal office where transfer agent activities are, or will be, performed:

3(c)(i). Address 1

710 POWDERHORN CIRCLE

3(c)(ii). Address 2

3(c)(iii). City

LAKE MARY

3(c)(iv). State or Country

FLORIDA

3(c)(v). Postal Code

32746

3(d). Is mailing address different from response to Question 3(c)?

Yes

No

If "yes," provide address(es):

3(d)(i). Address 1

3(d)(ii).Address 2

3(d)(iii).City

3(d)(iv). State or Country

3(d)(v). Postal Code

3(e). Telephone Number
(Include Area Code)

407. 322. 5669

4. Does registrant conduct, or will it conduct, transfer agent activities at any location other than that given in Question 3(c) above?

Yes

No

If "yes," provide address(es):

4(a)(i). Address #1

4(a)(ii). Address #2

4(a)(iii). City

4(a)(iv). State or Country

4(a)(v). Postal Code

5. Does registrant act, or will it act, as a transfer agent solely for its own securities and/or securities of an affiliate(s)?

Yes

No

6. Has registrant, as a named transfer agent, engaged, or will it engage, a service company to perform any transfer agent functions?

Yes

No

If "yes," provide the name(s) and address(es) of all service companies engaged, or that will be engaged, by the registrant to perform its transfer agent functions:

6(a). Name:

6(b). File
Number:

 -

6(c)(i). Address 1

6(c)(ii). Address 2

6(c)(iii). City

6(c)(iv). State or Country

6(c)(v). Postal Code

7. Has registrant been engaged, or will it be engaged, as a service company by a named transfer agent to perform transfer agent functions?

Yes

No

If "yes," provide the name(s) and File Number(s) of the named transfer agent(s) for which the registrant has been engaged, or will be engaged, as a service company to perform transfer agent functions:

7(a). Name:

7(b). File

Number:

 -

7(c)(i). Address 1

7(c)(ii). Address 2

7(c)(iii). City

7(c)(iv). State or Country

7(c)(v). Postal Code

Completion of Question 8 on this form is required by all independent, non-issuer registrants whose appropriate regulatory authority is the Securities and Exchange Commission. Those registrants who are not required to complete Question 8 should select "Not Applicable."

8. Is
registrant a:

- Corporation
- Partnership
- Sole Proprietorship
- Other
- Not Applicable

Section for Initial Registration and for Amendments Reporting Additional Persons. (Corporation or Partnership)

8(a)(i). Full Name

11(a). Signature of Official responsible for Form: <i>Carole Taormina</i>	11(b). Telephone Number: <i>407-322-5669</i>
11(c). Title of Signing Officer: <i>PRESIDENT</i>	11(d). Date Signed (Month/Day/Year): <i>03/30/08</i>

12. Related Documents/Attachments

12(a). File Name:	<i>AFFILIATED STOCK TRANSFER Co</i>
12(b). Type of Attachment:	<input checked="" type="radio"/> COVER <input type="radio"/> CORRESP <input type="radio"/> GRAPHIC
12(c). Type of Attachment Additional Description:	<i>Letter requesting exemption from electronic filing.</i>
12(d). Attachment Description:	
12(e). File:	

END