2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 854237

Entity Name: MATRIX* SALES & MARKETING INCORPORATED

FILED Jan 04, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

111 E CENTRAL AVE SUITE 111

HOWEY IN THE HILLS, FL 34737 US

New Mailing Address: Current Mailing Address:

P O BOX 236

YALAHA, FL 34797 US

FEI Number: 59-1953165 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BURNS, ROBERT J. 8215 OAK ST.

BOX 236

BOX 236 YALAHA, FL 34797 US YALAHA, FL 34797 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,

BURNS, ROBERT J SR.

8215 OAK ST.

in the State of Florida.

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

SIGNATURE: ROBERT J. BURNS SR

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

01/04/2005

Title: (X) Change () Addition **PCFO** () Delete Title: PCFO. BURNS, ROBERT J., Name: Name: BURNS, ROBERT J SR. 8215 OAK ST. 8215 OAK ST. Address: Address:

City-St-Zip: YALAHA, FL City-St-Zip: YALAHA, FL 34797

Title: Title: () Delete (X) Change () Addition EDINGTON, LORRAINE E, . Name: Name: EDINGTON, LORRAINE E

8215 OAK ST. 8215 OAK ST. Address: Address: YALAHA, FL YALAHA, FL 34797 City-St-Zip: City-St-Zip:

Title: AVP Title: () Delete () Change () Addition

HAMMOND, DONNA L Name: Name: P.O. BOX 2011 Address: Address: City-St-Zip: ALACHUA, FL 32616 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ROBERT J. BURNS SR **PCEO** 01/04/2005