

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 854237

FILED
Mar 22, 2009
Secretary of State

Entity Name: MATRIX* SALES & MARKETING INCORPORATED

Current Principal Place of Business:

111 E CENTRAL AVE
SUITE 111
HOWEY IN THE HILLS, FL 34737 US

New Principal Place of Business:

267 N.W. CAIRO ROAD,
DAY,, FL 32013 US

Current Mailing Address:

P.O. BOX 220
DAY, FL 32013 US

New Mailing Address:

267 N.W. CAIRO ROAD,
P.O. BOX 220
DAY,, FL 32013 US

FEI Number: 59-1953165

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BURNS, ROBERT J SR.
267 NW CAIRO ROAD,
DAY, FL 32013 US

Name and Address of New Registered Agent:

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

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: BURNS, ROBERT J SR.
Address: 267 NW CAIRO ROAD,
City-St-Zip: DAY, FL 32013

Title: SEC () Delete
Name: EDINGTON, LORRAINE E
Address: 267 NW CAIRO ROAD,
City-St-Zip: DAY, FL 32013

Title: TRE () Delete
Name: HAMMOND, DONNA L
Address: P.O. BOX 2011
City-St-Zip: ALACHUA, FL 32616

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TRES (X) Change () Addition
Name: HAMMOND, DONNA L
Address: 8028 N.W. 156 AVENUE,
City-St-Zip: ALACHUA, FL 32616

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: ROBERT J. BURNS SR

PRES

03/22/2009

Electronic Signature of Signing Officer or Director

_____ Date