2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000003613

Entity Name: STRATEGIC MARKETING SOLUTIONS OF AMERICA, INC.

FILED Aug 25, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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220 N. HWY. 393 1204 E. LAKEWALK CIRCLE

SANTA ROSA BEACH, FL 32459 US PANAMA CITY BEACH, FL 32413 US

Current Mailing Address: New Mailing Address:

4309 GRAY OAKS DRIVE NASHVILLE, TN 37204

FEI Number: 26-0691297 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:

YARIAN, DAVID YARIAN, DAVID

220 N. HWY. 393 1204 E. LAKEWALK CIRCLE

SANTA ROSA BEACH, FL 32459 US PANAMA CITY BEACH, FL 32413 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: DAVID YARIAN 08/25/2008

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 ANDERS, SANDI
 Name:
 ANDERS, SANDI

 Address:
 492 W. HARBORVIEW
 Address:
 4309 GRAY OAKS DR.

 City-St-Zip:
 SANTA ROSA BEACH, FL 32459 US
 City-St-Zip:
 NASHVILLE, T 37204 US

Title: VP () Delete Title: VP (X) Change () Addition

Name: YARIAN, DAVID Name: YARIAN, DAVID

 Address:
 492 W. HARBORVIEW
 Address:
 4309 GRAY OAKS DRIVE

 City-St-Zip:
 SANTA ROSA BEACH, FL 32459 US
 City-St-Zip:
 NASHVILLE, T 37204 US

Title: VP () Delete Title: () Change () Addition

Name: HILL, PAUL Name:

 Address:
 492 W. HARBORVIEW
 Address:

 City-St-Zip:
 SANTA ROSA BEACH, FL 32459
 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: SANDI ANDERS PRES 08/25/2008