

**2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
May 09, 2008  
Secretary of State**

DOCUMENT# P07000048385

Entity Name: VERTICAL SALES MANAGEMENT, INC.

**Current Principal Place of Business:**

1661 SANDSPUR ROAD  
MAITLAND, FL 32751

**New Principal Place of Business:**

**Current Mailing Address:**

1661 SANDSPUR ROAD  
MAITLAND, FL 32751

**New Mailing Address:**

FEI Number: 26-0499315      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BURKEY, JULIE  
1661 SANDSPUR RD  
MAITLAND, FL 32751      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

**OFFICERS AND DIRECTORS:**

Title: PT ( ) Delete  
Name: BURKEY, STEFAN  
Address: 1661 SANDSPUR ROAD  
City-St-Zip: MAITLAND, FL 32751

Title: VPSD ( ) Delete  
Name: BURKEY, JULIE  
Address: 1661 SANDSPUR ROAD  
City-St-Zip: MAITLAND, FL 32751

Title: VPD ( ) Delete  
Name: BURKEY, LISA  
Address: 7579 BRIGHTWATER DRIVE  
City-St-Zip: OVIEDO, FL 32765

Title: VP ( ) Delete  
Name: MCDONALD, ALVA DANIEL  
Address: 125 CEDAR RIDGE LANE  
City-St-Zip: SANFORD, FL 32771

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PTD (X) Change ( ) Addition  
Name: BURKEY, STEFAN  
Address: 1661 SANDSPUR ROAD  
City-St-Zip: MAITLAND, FL 32751

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

Title: VP (X) Change ( ) Addition  
Name: BURKEY, LISA  
Address: 7579 BRIGHTWATER DRIVE  
City-St-Zip: OVIEDO, FL 32765

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: JULIE M BURKEY

VP

05/09/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date