

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000034627

Entity Name: INDIGO MARKETING, INC.

FILED
Jan 04, 2008
Secretary of State

Current Principal Place of Business:

2 BRANFORD LN.
HILTON HEAD, SC 29926

New Principal Place of Business:

Current Mailing Address:

717 EAST OAK STREET
KISSIMMEE, FL 34744 US

New Mailing Address:

FEI Number: 57-1119307

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SWART, HARRY J CPA
717 E OAK STREET
KISSIMMEE, FL 34744 US

Name and Address of New Registered Agent:

SWART, BAUMRUK & COMPANY, LLP
717 E OAK STREET
KISSIMMEE, FL 34744 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: HARRY J. SWART, CPA

01/04/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: BONIFACE, DARREN J
Address: 2 BRANFORD LANE
City-St-Zip: HILTON HEAD, SC 29926

Title: DVPS () Delete
Name: BONIFACE, MICHELLE L
Address: 2 BRANFORD LANE
City-St-Zip: HILTON HEAD, SC 29926

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: DARREN J. BONIFACE

PRES

01/04/2008

Electronic Signature of Signing Officer or Director

Date