

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 337622

FILED  
Apr 10, 2007  
Secretary of State

Entity Name: WITCH MARKETING INC

**Current Principal Place of Business:**

2727 WEST MAIN STREET  
LEESBURG, FL 34748

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 490667  
LEESBURG, FL 347490667 US

**New Mailing Address:**

FEI Number: 59-1281069      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

BJORN, JUDY  
5525 BANANA POINT DRIVE  
OKAHUMPKA, FL 34762 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: P ( ) Delete  
Name: BJORN, JUDY  
Address: 5525 BANANA POINT DRIVE  
City-St-Zip: OKAHUMPKA, FL 34762

Title: ST ( ) Delete  
Name: BJORN, JUDITH,  
Address: 5525 BANANA POINT DRIVE  
City-St-Zip: OKAHUMPKA, FL 34762

Title: V (X) Delete  
Name: GARNER, THOMAS G  
Address: 6251 NE 2ND PLACE  
City-St-Zip: OCALA, FL 34470

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

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

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 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: JUDY BJORN

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

PRES

04/10/2007

\_\_\_\_\_ Date