# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 04, 2007**
**Secretary of State**

DOCUMENT# 462692

**Entity Name:** HALLMARK DISTRIBUTORS, INC.

**Current Principal Place of Business:**

105 AUBURN AVENUE
FT. WALTON BEACH, FL 32547

**New Principal Place of Business:**

105 AUBURN ROAD
FT. WALTON BEACH, FL 32547

**Current Mailing Address:**

105 AUBURN AVENUE
FT. WALTON BEACH, FL 32547

**New Mailing Address:**

105 AUBURN ROAD
FT. WALTON BEACH, FL 32547

**FEI Number: 59-1768233** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

WHITWORTH, LEO A JR
105 AUBURN AVENUE
FT. WALTON BEACH, FL 32548 US

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

WHITWORTH, LEO A JR
105 AUBURN ROAD
FT. WALTON BEACH, FL 32547 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: 04/04/2007
Electronic Signature of Registered Agent — Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete
Name: WHITWORTH, LEO A JR,
Address: 105 AUBURN AVE
City-St-Zip: FT WALTON BCH, FL 0,

Title: VP ( ) Delete
Name: GORDON, DEAN A
Address: 604 LAKEVIEW DR
City-St-Zip: MARY ESTHER, FL 32569

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

Title: PD (X) Change ( ) Addition
Name: WHITWORTH, LEO A JR,
Address: 105 AUBURN ROAD
City-St-Zip: FT WALTON BEACH, FL 32547

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: ANGELA POWERS CONT 04/04/2007
Electronic Signature of Signing Officer or Director — Date