2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 809097

FILED Jan 27, 2012 Secretary of State

Entity Name: DIRECTORY DISTRIBUTING ASSOCIATES, INC.

Current Principal Place of Business: New Principal Place of Business:

1602 PARK 370 COURT HAZELWOOD, MO 63042

Current Mailing Address: New Mailing Address:

P.O. BOX 10066 P.O. BOX 338

ST LOUIS, MO 631450066 HAZELWOOD, MO 63042

FEI Number: 43-1292935 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:

NRAI SERVICES, INC. 515 E. PARK AVENUE

TALLAHASSEE, FL 32301 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P, D

Name: RUNK, JUDITH A Address: 8512 STATE RTE C

City-St-Zip: SAINTE GENEVIEVE, MO 63670

Title: VT

 Name:
 SHELTON, MICHAEL L

 Address:
 17702 LITTLELEAF CT.

 City-St-Zip:
 CHESTERFIELD, MO 63005

Title: D

Name: RUNK, JOHN W Address: 8512 STATE RTE C

City-St-Zip: SAINTE GENEVIEVE, MO 63670

Title:

Name: BRYAN, KRISTY R
Address: 1825 E. STATE HWY AA
City-St-Zip: SPRINGFIELD, MO 65803

Title: \

Name: NOLAN, JACK
Address: 2099 WINDSONG WAY
City-St-Zip: MONROE, GA 30656

Title: V

Name: FOWLER, JAMES

Address: 2601 BRAEMAR PARKWAY
City-St-Zip: LAKE ST. LOUIS, MO 63367

I hereby 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 all other like empowered.

SIGNATURE: KRISTY RUNK BRYAN SECR 01/27/2012