2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 825797

Entity Name: HALLMARK MARKETING CORPORATION

FILED Mar 16, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2501 MC GEE 2501 MC GEE MAIL DROP 407 MAIL DROP 407 KANSAS CITY, MO 64141 US KANSAS CITY, MO 64108 US **Current Mailing Address: New Mailing Address:** ATTN: TAX DEPT. 407 BOX 419479 KANSAS CITY, MO 64141 FEI Number: 43-0820871 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: CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition PAOLETTI, STEVE Name: Name: 12706 CEDAR Address: Address: City-St-Zip: LEAWOOD, KS 66209 City-St-Zip: Title: Title: () Delete () Change () Addition Name: KATZ, BARRY Name: Address: 11333 HEMLOCK Address: OVERLAND PARK, KS 66210 City-St-Zip: City-St-Zip: Title: Title: AS () Delete () Change () Addition HARTLEY, KEVIN Name: Name: 16 F STREET Address: Address: City-St-Zip: LAKE LOTAWANA, MO 64086 City-St-Zip: Title: () Delete Title: () Change () Addition MCKINNEY, BRUCE Name: Name: Address: 10423 WEST 126TH STREET Address: City-St-Zip: OVERLAND PARK, KS 66213 City-St-Zip: Title: Title: () Delete () Change () Addition MACPHERSON, LISA Name: Name: 4813 WEST 148TH Address: Address: City-St-Zip: LEAWOOD, KS 66224 City-St-Zip: Title: () Delete Title: () Change () Addition Name: BOIKE, JAMES Name: 1001 WEST 66TH STREET Address: Address: City-St-Zip: City-St-Zip: KANSAS CITY, MO 64113

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: KEVIN M HARTLEY AS 03/16/2009