

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000005701

FILED
Jul 25, 2006
Secretary of State

Entity Name: NATIONAL MARKETING CORPORATION MS

Current Principal Place of Business:

18315B LANDON ROAD
GULFPORT, MS 39503

New Principal Place of Business:

602 SOUTH MAIN STREET
CRESTVIEW, FL 32536

Current Mailing Address:

P.O. BOX 909
CRESTVIEW, FL 32536

New Mailing Address:

602 SOUTH MAIN STREET
CRESTVIEW, FL 32536

FEI Number: 72-1354578

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SIMMONS, VERNON
5735 HWY 85 N.
CRESTVIEW, FL 32536 US

Name and Address of New Registered Agent:

SIMMONS, VERNON L
602 SOUTH MAIN STREET
CRESTVIEW, FL 32536 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: VERNON L SIMMONS

07/25/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: SIMMONS, VERNON
Address: 5901 SAPP ROAD
City-St-Zip: CRESTVIEW, FL 32539

Title: VCVP () Delete
Name: SIMMONS, DRESDEN
Address: 5901 SAPP ROAD
City-St-Zip: CRESTVIEW, FL 32539

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CP (X) Change () Addition
Name: SIMMONS, VERNON
Address: 5735 HWY. 85 NORTH
City-St-Zip: CRESTVIEW, FL 32536

Title: VCVP (X) Change () Addition
Name: SIMMONS, DRESDEN
Address: 5735 HWY. 85 NORTH
City-St-Zip: CRESTVIEW, FL 32536

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: VERNON L SIMMONS

CP

07/25/2006

Electronic Signature of Signing Officer or Director

Date