

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000005366

FILED  
Apr 13, 2009  
Secretary of State

Entity Name: ASPEN MARKETING SERVICES, INC.

## Current Principal Place of Business:

1240 NORTH AVENUE  
WEST CHICAGO, IL 60185

## New Principal Place of Business:

## Current Mailing Address:

1240 NORTH AVENUE  
WEST CHICAGO, IL 60185

## New Mailing Address:

FEI Number: 95-3653850

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: DP ( ) Delete  
Name: O'RAHILLY, PATRICK  
Address: 1240 NORTH AVENUE  
City-St-Zip: WEST CHICAGO, IL 60185

Title: DV ( ) Delete  
Name: LANG, CATHY  
Address: 1240 NORTH AVENUE  
City-St-Zip: WEST CHICAGO, IL 60185

Title: SV ( ) Delete  
Name: DINOVI, FIORE  
Address: 1240 NORTH AVENUE  
City-St-Zip: WEST CHICAGO, IL 60185

Title: VT ( ) Delete  
Name: DANNER, DONALD  
Address: 1240 NORTH AVENUE  
City-St-Zip: WEST CHICAGO, IL 60185

Title: D ( ) Delete  
Name: ZWILLINGER, DAVID  
Address: 120 WEST 45TH ST. 39 FLR TWR 45  
City-St-Zip: NEW YORK, NY 10036

Title: D ( ) Delete  
Name: SMITH, RENNY  
Address: 275 MADISON AVENUE SUITE 600  
City-St-Zip: NEW YORK, NY 10016

## 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:

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 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: FIORE DINOVI

SV

04/13/2009

Electronic Signature of Signing Officer or Director

Date