

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000002207

FILED
Jan 10, 2007
Secretary of State

Entity Name: THE MARKETING ALLIANCE BROKERS NETWORK, INC.

Current Principal Place of Business:

128 ERIE BLVD.
SCHENECTADY, NY 12305

New Principal Place of Business:

111 WEST PORT PLAZA
SUITE 1010
SAINT LOUIS, MO 63146

Current Mailing Address:

128 ERIE BLVD.
SCHENECTADY, NY 12305

New Mailing Address:

FEI Number: 56-1973188

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: S () Delete
Name: MURRAY, EDWARD
Address: 147 HORTSMAN DR
City-St-Zip: SCOTIA, NY 12302

Title: D () Delete
Name: JETTER, ART
Address: 13624 PARKER CIR
City-St-Zip: OMAHA, NE 68154

Title: C () Delete
Name: VERZONE, RONALD
Address: 30 CARRIAGE DR
City-St-Zip: LOWELL, MA 01853

Title: D () Delete
Name: DEWALD, JACK
Address: 8275 TOURNAMENT DR 5350
City-St-Zip: MEMPHIS, TN 38125

Title: D () Delete
Name: GLASSFORD, GARY
Address: 2331 EAST OSBORN
City-St-Zip: SCOTTSDALE, AZ 85016

Title: D () Delete
Name: STEWART, JAMES
Address: 4026 WINDWARD DR
City-St-Zip: TEGA CAY, SC 29708

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Name:
Address:
City-St-Zip:

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Address:
City-St-Zip:

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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 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: EDWARD MURRAY

TREA

01/10/2007

Electronic Signature of Signing Officer or Director

Date