2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000004058

Entity Name: THE GENERATION MARKETING, INC.

FILED Jun 24, 2009 Secretary of State

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

413 36TH STREET 508 HARBOR POINTE WEST PALM BEACH, FL 33407 GREENACRES, FL 33413

Current Mailing Address: New Mailing Address:

413 36TH STREET 508 HARBOR POINTE WEST PALM BEACH, FL 33407 GREENACRES, FL 33413

FEI Number: 58-2254224 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

DECKARD, CHAD DECKARD, CHAD 508 HARBÓR POINTE 413 36TH STREET WEST PALM BEACH, FL 33407 US GREENACRES, FL 33413 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: CHAD DECKARD 06/24/2009

> 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CHRM () Delete Title: CHRM (X) Change () Addition

DECKARD, CHAD Name: Name: DECKARD, CHAD 413 36TH STREET **508 HARBOR POINTE** Address: Address: City-St-Zip: WEST PALM BEACH, FL 33407 City-St-Zip: GREENACRES, FL 33413

Title: Title: (X) Change () Addition () Delete

Name: DECKARD, CHAD Name: DECKARD, CHAD 413 36TH STREET Address: **508 HARBOR POINTE** Address: WEST PALM BEACH, FL 33401 GREENACRES, FL 33413 City-St-Zip: 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.

Ρ SIGNATURE: CHAD DECKARD 06/24/2009