

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000005565

FILED  
Jan 16, 2009  
Secretary of State

**Entity Name:** COPERNICUS: THE MARKETING INVESTMENT STRATEGY GROUP, INC.

**Current Principal Place of Business:**

14602 SW 10TH ST.  
MIAMI, FL 33184

**New Principal Place of Business:**

**Current Mailing Address:**

15 RIVER ROAD  
SUITE 105  
WILTON, CT 06897 US

**New Mailing Address:**

230 EAST AVE.  
3RD FLOOR  
NORWALK, CT 06855 US

**FEI Number:** 06-1363341

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LIMA, ADRIANA  
14602 SW 10TH ST.  
MIAMI, FL 33184 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: PCEO ( ) Delete  
Name: CLANCY, KEVIN J  
Address: 78 HIGH POPPLES ROAD  
City-St-Zip: GLOUCESTER, MA 01930

Title: EVP ( ) Delete  
Name: KRIEG, PETER C  
Address: 6 GRAYS FARM ROAD  
City-St-Zip: WESTON, CT 06883

Title: VPT ( ) Delete  
Name: FAENZA, JEFFREY M  
Address: 15 DOE PLACE  
City-St-Zip: SHELTON, CT 06484

**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:

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: JEFFREY M FAENZA

CFO

01/16/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date