

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000006031

Entity Name: ST. MARKS POWDER, INC.

FILED
Apr 01, 2009
Secretary of State

Current Principal Place of Business:

11399 16TH COURT N. SUITE 200
SAINT PETERSBURG, FL 33716 US

New Principal Place of Business:

11399 16TH COURT NORTH
SUITE 200
SAINT PETERSBURG, FL 33716 US

Current Mailing Address:

11399 16TH COURT N. SUITE 200
SAINT PETERSBURG, FL 33716 US

New Mailing Address:

11399 16TH COURT NORTH
SUITE 200
SAINT PETERSBURG, FL 33716 US

FEI Number: 59-3543446

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAMERON, DEL S
11399 16TH COURT N. SUITE 200
SAINT PETERSBURG, FL 33716 US

Name and Address of New Registered Agent:

DAMERON, DEL S
11399 16TH COURT NORTH
SUITE 200
SAINT PETERSBURG, FL 33716 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:

04/01/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HALL, CHARLES M
Address: 2941 FAIRVIEW DR, STE 100
City-St-Zip: FALLS CHURCH, VA 22042

Title: V () Delete
Name: CORNWELL, GUY A
Address: 7121 COASTAL HIGHWAY
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: VS () Delete
Name: DAMERON, DEL S
Address: 11399 16TH CT N, STE 200
City-St-Zip: SAINT PETERSBURG, FL 33716

Title: VT () Delete
Name: MILAM, EVELYN L
Address: 11399 16TH CT NORTH SUITE 200
City-St-Zip: SAINT PETERSBURG, FL 33716

Title: DP () Delete
Name: WILSON, MICHAEL S
Address: 11399 126TH CT N, STE 200
City-St-Zip: SAINT PETERSBURG, FL 33716

Title: V () Delete
Name: SAVNER, DAVID A
Address: 2941 FAIRVIEW OAK DR, SUITE 100
City-St-Zip: FALLS CHURCH, VA 220424513

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: DEL S. DAMERON

VS

04/01/2009

Electronic Signature of Signing Officer or Director

Date