2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2009
Secretary of State

DOCUMENT# H85501

Entity Name: CRA MARKETING, INC.

Current Principal Place of Business:

1401 SECOND STREET
SARASOTA, FL 34236 US

New Principal Place of Business:

Current Mailing Address:

1401 SECOND ST.
P.O. BOX 49044
SARASOTA, FL 34230

New Mailing Address:

FEI Number: 59-2614339 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WOOD, THOMAS A.
1401 SECOND ST.
SARASOTA, FL 34236 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: CS ( ) Delete
Name: WOOD, THOMAS A.
Address: 902 DRAKESWOOD CT
City-St-Zip: SARASOTA, FL 34232

Title: PT ( ) Delete
Name: WOOD, THOMAS A.
Address: 902 DRAKESWOOD CT.
City-St-Zip: SARASOTA, FL 34232

Title: VP (X) Delete
Name: OGBURN, E.W.
Address: P O BOX 707
City-St-Zip: N. MYRTLE BEACH, SC 29507

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change ( ) Addition
Name: WOOD, THOMAS A.
Address: 902 DRAKESWOOD CT
City-St-Zip: SARASOTA, FL 34232

Title: DV (X) Change ( ) Addition
Name: OGBURN, E.W.
Address: P.O. BOX 707
City-St-Zip: NORTH MYRTLE BEACH, SC 29507

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: THOMAS A. WOOD P 04/15/2009

Electronic Signature of Signing Officer or Director — Date