

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000005422

Entity Name: ION MARKETING, LLC

FILED  
Apr 23, 2008  
Secretary of State

## Current Principal Place of Business:

197 MCWHORTER DRIVE  
FITZGERALD, GA 31750

## New Principal Place of Business:

## Current Mailing Address:

197 MCWHORTER DRIVE  
FITZGERALD, GA 31750

## New Mailing Address:

FEI Number: 03-0372238

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE, SUITE 4  
WESTON, FL 33331 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

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: DRISCOLL, MARK  
Address: 197 MCWHORTER DRIVE  
City-St-Zip: FITZGERALD, GA 31750

Title: MGR ( ) Delete  
Name: DRISCOLL, SUSAN  
Address: 197 MCWHORTER DRIVE  
City-St-Zip: FITZGERALD, GA 31750

Title: MGR ( ) Delete  
Name: WALL, KEVIN  
Address: 8750 WILSHIRE BLVD., SUITE 250  
City-St-Zip: BEVERLY HILLS, CA 90211

## ADDITIONS/CHANGES:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ANDI MCWHORTER

CFO

04/23/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date