

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M90735

FILED
Jul 05, 2008
Secretary of State

Entity Name: TITAN MARKETING GROUP, INC.

Current Principal Place of Business:

12 NEARFIELD COURT
GREENVILLE, SC 29615 US

New Principal Place of Business:

2131 WOODRUFF ROAD
SUITE 2100, #149
GREENVILLE, SC 29607 US

Current Mailing Address:

2131 WOODRUFF ROAD
SUITE 2100 #149
GREENVILLE, SC 29607 US

New Mailing Address:

2131 WOODRUFF ROAD
SUITE 2100, #149
GREENVILLE, SC 29607 US

FEI Number: 59-2909047 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FLORIDA INCORPORATORS, INC.
8875 HIDDEN RIVER PARKWAY
SUITE 300
TAMPA, FL 33637 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: PTD () Delete
Name: BALLARD, GALEN O.
Address: 12 NEARFIELD COURT
City-St-Zip: GREENVILLE, SC 29613

Title: VSD () Delete
Name: BALLARD, MARYANN
Address: 12 NEARFIELD COURT
City-St-Zip: GREENVILLE, SC 29613

Title: CD () Delete
Name: MELLON, R. BRADFORD,
Address: #20 SURREY RIDGE
City-St-Zip: CASTLE ROCK, CO

Title: D () Delete
Name: REID, JAMES D
Address: 4010 S. BLUE RIVER COVE
City-St-Zip: HOMOSASSA, FL 34448

Title: D () Delete
Name: GREGORY, DR. STEWART
Address: 629 ROCK SHADOW COURT
City-St-Zip: STONE MOUNTAIN, GA 30087

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: BALLARD, GALEN O.
Address: 16 BRAELOCK COURT
City-St-Zip: GREENVILLE, SC 29615

Title: VSD (X) Change () Addition
Name: BALLARD, MARYANN
Address: 16 BRAELOCK COURT
City-St-Zip: GREENVILLE, SC 29615

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: GALEN O. BALLARD

PRES

07/05/2008

Electronic Signature of Signing Officer or Director

_____ Date