

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M90735

FILED  
Feb 25, 2009  
Secretary of State

Entity Name: TITAN MARKETING GROUP, INC.

## Current Principal Place of Business:

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

## New Principal Place of Business:

## Current Mailing Address:

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

## New Mailing Address:

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: 16 BRAELOCK COURT  
City-St-Zip: GREENVILLE, SC 29615

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

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: 108 PLAYER WAY  
City-St-Zip: SIMPSONVILLE, SC 29681

Title: VSD (X) Change ( ) Addition  
Name: BALLARD, MARYANN  
Address: 108 PLAYER WAY  
City-St-Zip: SIMPSONVILLE, SC 29681

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: GREGORY, DR. STEWART  
Address: 3510 OLD U.S. 441 NORTH  
City-St-Zip: ALTO, GA 30510

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

02/25/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date