2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000069943

Entity Name: CMK FINANCIAL CORPORATION

FILED Jan 11, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3491 PALL MALL DRIVE SUITE 102 JACKSONVILLE, FL 32257 **New Mailing Address: Current Mailing Address:** 3491 PALL MALL DRIVE SUITE 102 JACKSONVILLE, FL 32257 FEI Number: 59-3656587 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HOVEY, CHARLES W HOVEY, CHARLES W 2877 SÚTTON ESTATES CIRCLE NORTH 11670 MANDARIN ROAD JACKSONVILLE, FL 32223 US JACKSONVILLE, FL 32223 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: 01/11/2006 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition HOVEY, CHARLES W Name: Name: 3491 PALL MALL DR., SUITE 102 Address: Address: City-St-Zip: JACKSONVILLE, FL 32257 City-St-Zip: Title: VSD Title: () Delete (X) Change () Addition HOVEY, MARYANN Name: HOVEY, MARY ANN Name: 3491 PALL MALL DRIVE, SUITE 102 3491 PALL MALL DRIVE, SUITE 102 Address: Address: JACKSONVILLE, FL 32257 City-St-Zip: JACKSONVILLE, FL 32257 City-St-Zip: Title: Title: () Change (X) Addition () Delete Name: BRUNS, KEITH J Name: 3491 PALL MALL DRIVE, SUITE 102 Address: Address: City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32257

I hereby certify that the information supplied with this filing does not qualify for the 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: CHARLES W HOVEY **PRES** 01/11/2006