


2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000062564 1. Entity Name GLOBAL MARKETING FORCE, INC.		
Principal Place of Business 1133 LOUISIANA AVE STE 1114 WINTER PARK, FL 32789	Mailing Address PO BOX 625 WINTER PARK, FL 32790	

FILED

08 JAN 30 PM 4:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01102008 No Chg-P CR2E034 (11/05)

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4. FEI Number 04-3694325	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MILLER, SOUTH & MILHAUSEN, P.A.
2699 LEE RD, SUITE 120
WINTER PARK, FL 32789

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

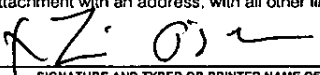
10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVT O'SHAUGHNESSY, TIMOTHY 10 N SUMMERLIN AVE, STE 37 ORLANDO, FL 32801
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPVS OSHAUGHNESSY, TIMOTHY 1133 LOUISISAN STE 1114 WINTER PARK, FL 32789
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/24/08 407-622-1377