

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000068171

FILED
Jan 19, 2009
Secretary of State

Entity Name: GIFT MARKETING ALLIANCE, INC.

Current Principal Place of Business:

3150 N. HARBOR CITY BLVD. #334
MELBOURNE, FL 32935

New Principal Place of Business:

Current Mailing Address:

665 SILVER LEDGE
COLD SPRING, KY 41076

New Mailing Address:

FEI Number: 03-0465984

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLEN, BETTY
2331 ADDISON AVE.
CLERMONT, FL 34711 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: PD () Delete
Name: HOLTZCLAW, EMMITT JR
Address: 3150 N. HARBOR CITY #334
City-St-Zip: MELBOURNE, FL 32935

Title: STD () Delete
Name: HOLTZCLAW, EMMA
Address: 3150 N. HARBOR CITY #334
City-St-Zip: MELBOURNE, FL 32935

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: EMMA HOLTZCLAW

STD

01/19/2009

Electronic Signature of Signing Officer or Director

Date