

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90772 012 ***150.00

DOCUMENT # P02000127257

1. Entity Name
MARKETING MACHINE CONSULTANTS, INC.



Principal Place of Business

1316 BOWMAN ST.
CLERMONT, FL 34711

Mailing Address

1316 BOWMAN ST.
CLERMONT, FL 34711

2. Principal Place of Business

10935 SE 177th PLACE

3. Mailing Address

10935 SE 177th PLACE

Suite, Apt. #, etc.

SUITE 402

Suite, Apt. #, etc.

SUITE 402

City & State

SUMMERFIELD, FL

City & State

SUMMERFIELD, FL

Zip

34491

Country

MARION

Zip

34491

Country

MARION

04232004

Chg-P

CR2E034 (10/03)

4. FEI Number

56-2305441

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HACKNEY, FREDERICK S
1316 BOWMAN ST.
CLERMONT, FL 34711

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

10935 SE 177th PLACE, SUITE 402

City

SUMMERFIELD

FL

Zip Code
34491

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, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **HACKNEY, FREDERICK S**
STREET ADDRESS **1316 BOWMAN ST.**
CITY-ST-ZIP **CLERMONT, FL 34711**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P, D** ☒ Change ☐ Addition
NAME
STREET ADDRESS **1310 SANTA ROSA COURT**
CITY-ST-ZIP **LADY LAKE, FL 32159**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 file empowered.

SIGNATURE:

Frederick S. Hackney, Pres. 4/26/04 352-307-7000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #