

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000115464

FILED  
Jul 17, 2006  
Secretary of State

**Entity Name:** CORNERSTONE MARKETING GROUP OF AMERICA, INC.

**Current Principal Place of Business:**

2298 LAKELAND HILLS BLVD  
LAKELAND, FL 33805

**New Principal Place of Business:**

**Current Mailing Address:**

2298 LAKELAND HILLS BLVD  
LAKELAND, FL 33805

**New Mailing Address:**

**FEI Number:** 20-0309717

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SUMNER, ROBERT F  
1125 LAKELAND HILLS BLVD  
LAKELAND, FL 33805 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SUMNER, ROBERT F  
Address: 1125 LAKELAND HILLS BLVD  
City-St-Zip: LAKELAND, FL 33805

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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: ROBERT SUMNER

P

07/17/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date