

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000051451

FILED
Apr 29, 2005
Secretary of State

Entity Name: LEADMARKETING CORPORATION

Current Principal Place of Business:

784 US HWY ONE SUITE 16
NORTH PALM BEACH, FL 33408

New Principal Place of Business:

1645 PALM BEACH LAKES BLVD
STE 420
WEST PALM BEACH, FL 33401

Current Mailing Address:

784 US HWY ONE SUITE 16
NORTH PALM BEACH, FL 33408

New Mailing Address:

1645 PALM BEACH LAKES BLVD
STE 420
WEST PALM BEACH, FL 33401

FEI Number: 04-3790187

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FILINGS, INC.
3732 N.W. 16TH STREET
FT. LAUDERDALE, FL 333114132 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: VSD () Delete
Name: ODLE, RICHARD
Address: 784 US HWY ONE SUITE 16
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: D () Delete
Name: MYERS, ANDREW
Address: 784 US HWY ONE SUITE 16
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: D () Delete
Name: BLOTNICK, WILLIAM
Address: 784 US HWY ONE SUITE 16
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: PD () Delete
Name: SIMONS, JASON
Address: 784 US HWY ONE SUITE 16
City-St-Zip: NORTH PALM BEACH, FL 33408

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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 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: JASON V SIMONS

PRES

04/29/2005

Electronic Signature of Signing Officer or Director

_____ Date