

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000063634

Entity Name: OZARK MARKETING INC.

FILED
Feb 08, 2006
Secretary of State

Current Principal Place of Business:

#810 GRAND HARBOR
662 HIGHWAY 98 EAST
DESTIN, FL 32541

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 4440
FAYETTEVILLE, AR 72702

New Mailing Address:

P.O.BOX 4707
FAYETTEVILLE, AR 72702

FEI Number: 71-0699017

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONNER, WILLIAM F
#810 GRAND HARBOR
662 HIGHWAY 98 EAST
DESTIN, FL 32541 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: D () Delete
Name: CONNER, WILLIAM F
Address: #810 GRAND HARBOR, 662 HIGHWAY 98 EAST
City-St-Zip: DESTIN, FL 32541

Title: D () Delete
Name: CONNER, FAUNE S
Address: #810 GRAND HARBOR, 662 HIGHWAY 98 EAST
City-St-Zip: DESTIN, FL 32541

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 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: WILLIAM F. CONNER

PRES

02/08/2006

Electronic Signature of Signing Officer or Director

Date