

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000102250

Entity Name: FINLEY MARKETING, INC.

FILED
Jul 18, 2007
Secretary of State

Current Principal Place of Business:

306 TORREYA RIVER TRACE
PORT ST LUCIE, FL 34986

New Principal Place of Business:

1755 SW NEWPORT ISLES BLVD
PORT ST LUCIE, FL 34953

Current Mailing Address:

306 TORREYA RIVER TRACE
PORT ST LUCIE, FL 34986

New Mailing Address:

1755 SW NEWPORT ISLES BLVD
PORT ST. LUCIE, FL 34953

FEI Number: 20-1348755

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FINLEY, CLIFFORD
306 TORREYA RIVER TRACE
PORT ST LUCIE, FL 34986 US

Name and Address of New Registered Agent:

FINLEY, CLIFFORD
1755 SW NEWPORT ISLES BLVD
PORT ST LUCIE, FL 34953 US

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: _____

07/18/2007

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: D () Delete
Name: FINLEY, CLIFFORD
Address: 306 TORREYA RIVER TRACE
City-St-Zip: PORT ST LUCIE, FL 34986

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: O () Change (X) Addition
Name: WILLS, MARK A
Address: 1487 SW GILROY RD
City-St-Zip: PORT ST. LUCIE, FL 34953

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: CLIFFORD L FINLEY

D

07/18/2007

Electronic Signature of Signing Officer or Director

Date