

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000104317

FILED  
Apr 26, 2011  
Secretary of State

**Entity Name:** INDEPENDENT MARKETING GROUP, INC.

**Current Principal Place of Business:**

1 INDEPENDENT DRIVE  
SUITE 3201  
JACKSONVILLE, FL 32202

**New Principal Place of Business:**

**Current Mailing Address:**

1 INDEPENDENT DRIVE  
SUITE 3201  
JACKSONVILLE, FL 32202

**New Mailing Address:**

PO BOX 331338  
ATLANTIC BEACH, FL 32233

**FEI Number:** 20-1382401

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MILAM HOWARD NICANDRI DEES & GILLAM, P.A.  
14 EAST BAY STREET  
JACKSONVILLE, FL 32202 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

**OFFICERS AND DIRECTORS:**

Title: CEO  
Name: BRYAN, SHELDON C  
Address: 1 INDEPENDENT DRIVE, SUITE 3201  
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: PD  
Name: FALLOON, NANCY  
Address: 1 INDEPENDENT DRIVE, SUITE 3201  
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: SD  
Name: BRYAN, CARTER  
Address: 1 INDEPENDENT DRIVE, SUITE 3201  
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: AS  
Name: HOWARD, G. ALAN  
Address: 14 EAST BAY STREET  
City-St-Zip: JACKSONVILLE, FL 32202 US

I hereby 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 all other like empowered.

SIGNATURE: SHELDON BRYAN

CEO

04/26/2011

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

\_\_\_\_\_  
Date