

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000154492

Entity Name: ADSIZZLE MARKETING, INC.

FILED  
Apr 28, 2006  
Secretary of State

## Current Principal Place of Business:

17633 GUNN HWY  
SUITE 123  
ODESSA, FL 33556

## New Principal Place of Business:

7853 GUNN HWY  
SUITE 123  
TAMPA, FL 33626

## Current Mailing Address:

17633 GUNN HWY  
SUITE 123  
ODESSA, FL 33556

## New Mailing Address:

7853 GUNN HWY  
SUITE 123  
TAMPA, FL 33626

FEI Number: 20-1865214

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WHITAKER, ANGELA S  
17633 GUNN HWY  
SUITE 123  
ODESSA, FL 33556 US

## Name and Address of New Registered Agent:

FOX, ANGELA S  
9108 SHADOW POND COURT  
ODESSA, FL 33556 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: ANGELA FOX

04/28/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P, D ( ) Delete  
Name: WHITAKER, ANGELA S  
Address: 9108 SHADOW POND COURT  
City-St-Zip: ODESSA, FL 33556

Title: VP (X) Delete  
Name: STROUD, RAMON  
Address: 17633 GUNN HWY SUITE 123  
City-St-Zip: ODESSA, FL 33556

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition  
Name: FOX, ANGELA S  
Address: 9108 SHADOW POND COURT  
City-St-Zip: ODESSA, FL 33556

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: ANGELA FOX

PSD

04/28/2006

Electronic Signature of Signing Officer or Director

Date