

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000166356

FILED
Feb 26, 2009
Secretary of State

Entity Name: FOCUS MARKETING ADVISORS INC

Current Principal Place of Business:

12300 ALTERNATE AIA
SUITE 203
PALM BEACH GARDENS, FL 33410 US

New Principal Place of Business:

14197 NORTH 86TH ROAD
LOXAHATCHEE, FL 33470 US

Current Mailing Address:

12300 ALTERNATE AIA
SUITE 203
PALM BEACH GARDENS, FL 33410 US

New Mailing Address:

14197 NORTH 86TH ROAD
LOXAHATCHEE, FL 33470 US

FEI Number: 20-3975951

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, JOHN P
2499 GLADES ROAD
SUITE 305A
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

FEIGENBAUM, ALAN S.C.P.A.
1700 WEST WOOLBRIGHT ROAD
SUITE 6
BOYNTON BEACH, FL 33426 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: ALAN FEIGENBAUM

02/26/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ALLICKSON, BRITTANY
Address: 12300 ALTERNATE AIA SUITE 203
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

Title: V () Delete
Name: DELAK, VICKI
Address: 12300 ALTERNATE AIA SUITE 203
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: ST (X) Delete
Name: SIMONS, TIM
Address: 12300 ALTERNATE AIA SUTIE 203
City-St-Zip: PALM BEACH GARDENS, FL 33410

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SIMONS, BRITTANY
Address: 14197 NORTH 86TH ROAD
City-St-Zip: LOXAHATCHEE, FL 33470 US

Title: V (X) Change () Addition
Name: SIMONS, TIM
Address: 14197 NORTH 86TH ROAD
City-St-Zip: LOXAHATCHEE, FL 33470

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

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: BRITTANY SIMONS

PD

02/26/2009

Electronic Signature of Signing Officer or Director

Date