

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000042313

FILED
Jan 19, 2009
Secretary of State

Entity Name: ENERGY MARKETING SERVICES, INC.

Current Principal Place of Business:

3546 HERON GLEN COURT
BONITA SPRINGS, FL 34134

New Principal Place of Business:

24600 S. TAMiami TRAIL, #212
OFFICE #307
BONITA SPRINGS, FL 34134

Current Mailing Address:

3546 HERON GLEN COURT
BONITA SPRINGS, FL 34134

New Mailing Address:

24600 S. TAMiami TRAIL, #212
OFFICE #307
BONITA SPRINGS, FL 34134

FEI Number: 31-1240257

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

STROHEN, ALBIN A
3546 HERON GLEN COURT
BONITA SPRINGS, FL 34134 US

Name and Address of New Registered Agent:

STROHEN, ALBIN A
24600 S. TAMiami TRAIL, #212
OFFICE #307
BONITA SPRINGS, FL 34134 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:

01/19/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DCEO () Delete
Name: STROHEN, ALBIN A
Address: 3546 HERON GLEN COURT
City-St-Zip: BONITA SPRINGS, FL 34134

Title: PST () Delete
Name: STROHEN, ALBIN A
Address: 3546 HERON GLEN COURT
City-St-Zip: BONITA SPRINGS, FL 34134

Title: DVP () Delete
Name: STROHEN, KAY D
Address: 3546 HERON GLEN COURT
City-St-Zip: BONITA SPRINGS, FL 34134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DCEO (X) Change () Addition
Name: STROHEN, ALBIN A
Address: 24600 S. TAMiami TRAIL, #212-307
City-St-Zip: BONITA SPRINGS, FL 34134

Title: PST (X) Change () Addition
Name: STROHEN, ALBIN A
Address: 24600 S. TAMiami TRAIL, #212-307
City-St-Zip: BONITA SPRINGS, FL 34134

Title: DVP (X) Change () Addition
Name: STROHEN, KAY D
Address: 24600 S. TAMiami TRAIL, #212-307
City-St-Zip: BONITA SPRINGS, FL 34134

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: ALBIN A. STROHEN

PST

01/19/2009

Electronic Signature of Signing Officer or Director

Date