2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000073206

Current Principal Place of Business:

40300 HORSESHOE RD

PUNTA GORDA, FL 33962

Current Mailing Address:

PUNTA GORDA, FL 33962

40300 HORSESHOE RD

SIZEMORE, KIMBERLY J

3944 HIDDEN ACRES CIRCLE SOUTH

NORTH FORT MYERS, FL 33903

FEI Number: 20-4978160

in the State of Florida.

SIGNATURE:

FILED Apr 30, 2009 Secretary of State

US

US

US

04/30/2009

04/30/2009

Date

Date

Name and Address of New Registered Agent:

Certificate of Status Desired ()

New Principal Place of Business:

40300 HORSESHOE RD

New Mailing Address:

40300 HORSESHOE RD.

SIZEMORE, KIMBERLY J 40300 HORSESHOE RD.

PUNTA GORDA, FL 33982

FEI Number Not Applicable ()

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,

PUNTA GORDA, FL 33982

PUNTA GORDA, FL 33982

Entity Name: FIRST IMAGE MARKETING, ADVERTISING AND PUBLISHING, INC.

US

US

Name and Address of Current Registered Agent:

Election Campaign Financing Trust Fund Contribution ().

FEI Number Applied For ()

Electronic Signature of Registered Agent

above, or on an attachment with an address, with all other like empowered.

Electronic Signature of Signing Officer or Director

SIGNATURE: KIMBERLY J. SIZEMORE

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition SIZEMORE, KIMBERLY J SIZEMORE, KIMBERLY J Name: Name: 3944 HIDDEN ACRES CIRCLE SOUTH 40300 HORSESHOE RD. Address: Address: City-St-Zip: NORTH FORT MYERS, FL 33903 US City-St-Zip: PUNTA GORDA, FL 33982 US Title: DV Title: (X) Change () Addition () Delete Name: SIZEMORE, DARRYL Name: SIZEMORE, DARRYL 3944 HIDDEN ACRES CIRCLE SOUTH 40300 HORSESHOE RD Address: Address: NORTH FORT MYERS, FL 33903 PUNTA GORDA, FL 33982 City-St-Zip: City-St-Zip: Title: Title: DST () Delete () Change () Addition FINCH, HELEN M Name: Name: 3575 JULIE DRIVE Address: Address: City-St-Zip: FRANKLIN, OH 45005 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

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