

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06505

FILED
May 01, 2009
Secretary of State

Entity Name: MARKET DISTRIBUTION SPECIALISTS, INC.

Current Principal Place of Business:

215 CENTER PARK DR
SUITE 1200
KNOXVILLE, TN 37922

New Principal Place of Business:

Current Mailing Address:

215 CENTER PARK DR
SUITE 1200
KNOXVILLE, TN 37922

New Mailing Address:

FEI Number: 58-1622677 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PR () Delete
Name: THORNTON, JANICE G
Address: 215 CENTER PARK DR, 1200
City-St-Zip: KNOXVILLE, TN 37922

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP () Change (X) Addition
Name: KNAPP, GEORGE J
Address: 215 CENTER PARK DRIVE, STE. 1200
City-St-Zip: KNOXVILLE, TN 37922

Title: VP () Change (X) Addition
Name: MCKINNEY, ALLYSON
Address: 215 CENTER PARK DRIVE, STE. 1200
City-St-Zip: KNOXVILLE, TN 37922

Title: VP () Change (X) Addition
Name: PYLE, JOHN
Address: 215 CENTER PARK DRIVE, STE. 1200
City-St-Zip: KNOXVILLE, TN 37922

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: JANICE G THORNTON

PR

05/01/2009

Electronic Signature of Signing Officer or Director

_____ Date