

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000003613

FILED  
Apr 30, 2009  
Secretary of State

**Entity Name:** STRATEGIC MARKETING SOLUTIONS OF AMERICA, INC.

**Current Principal Place of Business:**

1204 E. LAKEWALK CIRCLE  
PANAMA CITY BEACH, FL 32413 US

**New Principal Place of Business:**

**Current Mailing Address:**

4309 GRAY OAKS DRIVE  
NASHVILLE, TN 37204

**New Mailing Address:**

**FEI Number:** 26-0691297

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

YARIAN, DAVID  
1204 E. LAKEWALK CIRCLE  
PANAMA CITY BEACH, FL 32413 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: ANDERS, SANDI  
Address: 4309 GRAY OAKS DR.  
City-St-Zip: NASHVILLE, T 37204 US

Title: VP ( ) Delete  
Name: YARIAN, DAVID  
Address: 4309 GRAY OAKS DRIVE  
City-St-Zip: NASHVILLE, T 37204 US

Title: VP ( ) Delete  
Name: HILL, PAUL  
Address: 492 W. HARBORVIEW  
City-St-Zip: SANTA ROSA BEACH, FL 32459

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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:** SANDI ANDERS

PRES

04/30/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date