

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000026402

FILED
Jan 26, 2009
Secretary of State

Entity Name: PLACES & FACES MARKETING, INC.

Current Principal Place of Business:

127 LAKE MERIAL TRAIL
PANAMA CITY, FL 32409 US

New Principal Place of Business:

Current Mailing Address:

127 LAKE MERIAL TRAIL
SOUTHPORT, FL 32409 US

New Mailing Address:

FEI Number: 33-1205455

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROCKMAN, PEGGY
36 COUNTRY CLUB RD.
SHALIMAR, FL 32579 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: BROCKMAN, PEGGY P
Address: 851 HOLBROOK CIRCLE
City-St-Zip: FT. WALTON BEACH, FL 32547 US

Title: VP () Delete
Name: ALLEY, JENELL
Address: 127 LAKE MERIAL TRAIL
City-St-Zip: SOUTHPORT, FL 32409 US

Title: TREA () Delete
Name: ALLEY, JENELL
Address: 127 LAKE MERIAL TRAIL
City-St-Zip: SOUTHPORT, FL 32409 US

Title: SEC () Delete
Name: BROCKMAN, PEGGY P
Address: 851 HOLBROOK CIRCLE
City-St-Zip: FT. WALTON BEACH, FL 32547 US

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:

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: PEGGY BROCKMAN

P

01/26/2009

Electronic Signature of Signing Officer or Director

Date