

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000057498

**FILED**  
**Mar 04, 2011**  
**Secretary of State**

**Entity Name:** TWO PILLARS MARKETING SOLUTIONS, INC.

**Current Principal Place of Business:**

3014 HIGHWAY 301 NORTH  
SUITE 700  
TAMPA, FL 33619 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1925  
BRANDON, FL 335091925

**New Mailing Address:**

**FEI Number:** 26-3231970

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ADAMS, DAVID W  
1925 EAST SECOND AVENUE  
TAMPA, FL 33605 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: PEEPLES, MATTHEW  
Address: 3014 HIGHWAY 301 NORTH SUITE 700  
City-St-Zip: TAMPA, FL 33619 US

Title: VP/D  
Name: SHERIDAN, BILL  
Address: 3014 HIGHWAY 301 NORTH SUITE 700  
City-St-Zip: TAMPA, FL 33619 US

Title: S  
Name: PEEPLES, MATTHEW  
Address: 3014 HIGHWAY 301 NORTH SUITE 700  
City-St-Zip: TAMPA, FL 33619

Title: T  
Name: PEEPLES, ANGELA  
Address: 3014 HIGHWAY 301 NORTH SUTIE 700  
City-St-Zip: TAMPA, FL 33619 US

I hereby 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 all other like empowered.

SIGNATURE: MATTHEW PEEPLES

P

03/04/2011

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

\_\_\_\_\_  
Date