2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000077078

City-St-Zip:

PORT ORANGE, FL 32128

Entity Name: MARKETING FORTE INC

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 511 N COUNTY ROAD 415 NEW SMYRNA BEACH, FL 32168 **Current Mailing Address: New Mailing Address:** 511 N COUNTY ROAD 415 NEW SMYRNA BEACH, FL 32168 FEI Number: 20-3209874 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FRAZER, ROBERT D 2090 S NOVA RD SUITE AA05 DAYTONA BEACH, FL 32119 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition CHENEY, JOHN Name: Name: 5773 FALLING TREE LANE Address: Address: City-St-Zip: PORT ORANGE, FL 32127 City-St-Zip: Title: VΡ Title: () Delete () Change () Addition LESZEWSKI, JOHN R Name: Name: 323 FOUNTAIN LAKES BLVD Address: Address: DAYTONA BEACH, FL 32117 City-St-Zip: City-St-Zip: Title: Title: TRFA () Delete () Change () Addition WIRSCHING, JOHN R Name: Name: 139 DAWN DRIVE Address: Address: City-St-Zip: ORMOND BEACH, FL 32176 City-St-Zip: Title: SEC () Delete Title: () Change () Addition BAZANOS, CHÉRYL A Name: Name: Address: 6462 LONGLAKE DRIVE Address:

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.

City-St-Zip:

SIGNATURE: JOHN CHENEY P 04/30/2009