

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P22432

FILED  
Apr 16, 2008  
Secretary of State

Entity Name: MARKEY'S AUDIOVISUAL, INC.

## Current Principal Place of Business:

969 ALEXANDER AVE  
UNIT C  
PORT ORANGE, FL 32129 US

## New Principal Place of Business:

## Current Mailing Address:

2909 S MERIDIAN ST  
INDIANAPOLIS, IN 462252372 US

## New Mailing Address:

FEI Number: 35-1467871

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HEATH, JAMISON J  
969 ALEXANDER AVE  
UNIT C  
PORT ORANGE, FL 32129 US

## Name and Address of New Registered Agent:

NEILSON, WILLIAM G  
969 ALEXANDER AVE  
UNIT C  
PORT ORANGE, FL 32129 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: WILLIAM G. NEILSON

04/16/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: OD ( ) Delete  
Name: MARKEY, CHARLES J JR  
Address: 2909 S. MERIDIAN  
City-St-Zip: INDIANAPOLIS, IN 46225

Title: OD ( ) Delete  
Name: MILLER, MARK  
Address: 2909 S. MERIDIAN  
City-St-Zip: INDIANAPOLIS, IN 46225

Title: OD ( ) Delete  
Name: BRINDUSE, JOY  
Address: 2909 S. MERIDIAN  
City-St-Zip: INDIANAPOLIS, IN 46225

Title: OD ( ) Delete  
Name: STEEB, GREG  
Address: 2909 S MERIDIAN ST  
City-St-Zip: INDIANAPOLIS, IN 46225

## 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: JOY BRINDUSE

OD

04/16/2008

Electronic Signature of Signing Officer or Director

Date