2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2006
Secretary of State

DOCUMENT# P93000009894

Entity Name: HAMILTON MARKETING, INC.

Current Principal Place of Business:

12990 BEACON COVE LANE
FORT MYERS, FL 33919

New Principal Place of Business:

Current Mailing Address:

5836 REINHARDT DR
SHAWNEE MISSION, KS 662053328 US

New Mailing Address:

FEI Number: 65-0396083 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: CD ( ) Delete
Name: HAMILTON, STANLEY A
Address: 12990 BEACON COVE LANE
City-St-Zip: FORT MYERS, FL 33919

Title: PD ( ) Delete
Name: HAMILTON, BENNETT M
Address: 15210 GRANADA
City-St-Zip: LEAWOOD, KS 66224

Title: VSTD ( ) Delete
Name: HAMILTON, LAURIE J
Address: 5836 REINHARDT DRIVE
City-St-Zip: SHAWNEE MISSION, KS 662053328

Title: VD ( ) Delete
Name: HAMILTON, JOYCE W
Address: 12990 BEACON COVE LANE
City-St-Zip: FORT MYERS, FL 33919

Title: D (X) Delete
Name: EGAN, CHARLES J JR
Address: 712 E 47TH ST
City-St-Zip: KANSAS CITY, MO 64110

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD (X) Change ( ) Addition
Name: HAMILTON, BENNETT W
Address: 15210 GRANADA
City-St-Zip: LEAWOOD, KS 66224

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 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: LAURIE J HAMILTON VSTD 01/11/2006

Electronic Signature of Signing Officer or Director — Date