

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000042938

FILED  
Apr 27, 2009  
Secretary of State

Entity Name: AMERICAN MARKETING & MAILING SERVICES, INC.

**Current Principal Place of Business:**

9427 CORPORATE LAKE DRIVE  
TAMPA, FL 33634 US

**New Principal Place of Business:**

**Current Mailing Address:**

9427 CORPORATE LAKE DRIVE  
TAMPA, FL 33634 US

**New Mailing Address:**

FEI Number: 59-3247799      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MOORE, STEPHEN W.  
8200 BRYAN DAIRY RD  
SUITE 300  
LARGO, FL 33777 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: PCEO ( ) Delete  
Name: FEST, CHARLES W. JR.  
Address: 16617 VALLEY DR  
City-St-Zip: TAMPA, FL 33618

Title: V ( ) Delete  
Name: FEST, ANTHONY C  
Address: 22638 CLIFFSIDE WAY  
City-St-Zip: LAND O LAKES, FL 34639

Title: T ( ) Delete  
Name: GIGLIA, LISA A  
Address: 18135 LEAFWOOD CIRCLE  
City-St-Zip: LUTZ, FL 33558

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PCEO (X) Change ( ) Addition  
Name: FEST JR., CHARLES W  
Address: 16617 VALLEY DR  
City-St-Zip: TAMPA, FL 33618

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: CHARLES W. FEST JR.

PCEO

04/27/2009

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

\_\_\_\_\_ Date