2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000092362

2630 NOBLE DRIVE

TALLAHASSEE, FL 32308

Address:

City-St-Zip:

Entity Name: CMD PUBLISHING CORPORATION

FILED Mar 30, 2009 Secretary of State

Littly Nai	ille. CIVID FOI	SLISHING CORPORATION				
Current P	rincipal Place	of Business:	New Princip	New Principal Place of Business:		
2957 CAPITAL PARK DR. STE. 9				119 E. PARK AVE. TALLAHASSEE, FL 32301		
	SSEE, FL 3230	01		,		
Current M	lailing Addres	s:	New Mailing	New Mailing Address:		
PO BOX 1: TALLAHAS	5529 SSEE, FL 323	17				
FEI Number:	: 59-3351790	FEI Number Applied For ()	FEI Number Not Applica	able () Certificate of Statu	us Desired()	
Name and	Address of C	Surrent Registered Agent:	Name and A	Name and Address of New Registered Agent:		
MIXON, M 119 E PAR TALLAHAS		01 US	119 E PARK	PALMER-DUKES, ANDREA K 119 E PARK AVE TALLAHASSEE, FL 32301 US		
	named entity s e of Florida.	submits this statement for the p	urpose of changing its	registered office or registered	d agent, or both,	
SIGNATUR	RE: ANDREA	K. PALMER-DUKES		03/30/2009		
	Electron	ic Signature of Registered Age	nt	Date		
Election Car	mpaign Financing	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITIONS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () MIXON, M. JUH 2630 NOBLE D TALLAHASSEE	RIVE	Title: Name: Address: City-St-Zip:	()Change ()Addition	1	
Title: Name: Address: City-St-Zip:	D () DUKES, GARNI 3207 BROOKFI TALLAHASSEE	OREST DR	Title: Name: Address: City-St-Zip:	()Change ()Addition	1	
Title: Name: Address: City-St-Zip:	ST () DUKES, ANDRI 4631 INISHEEF TALLAHASSEE	RDR	Name: I Address: 4	ST (X) Change () Additior DUKES, ANDREA K 4631 INISHEER DR FALLAHASSEE, FL 32309	1	
Title: Name:	D () MIXON, PAT C	Delete	Title: Name:	() Change () Addition	1	

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.

Address:

City-St-Zip:

SIGNATURE: ANDREA K. PALMER-DUKES S/T 03/30/2009