

4/9/02

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 21, 2002 8:00 am
Secretary of State

04-09-2002 90068 033 ***150.00

DOCUMENT # P97000001926

1. Entity Name

SIGNATURE MARKETING GROUP, INC.

Principal Place of Business

2960 S MCCALL RD #204
 ENGLEWOOD FL 34224-8069
 US

Mailing Address

2960 S MCCALL RD #204
 ENGLEWOOD FL 34224-8069
 US

2. Principal Place of Business

1503 S McCall Road

Suite, Apt. #, etc.

Unit B

City & State

Englewood Florida

Zip

34223

Country

USA

3. Mailing Address

67 W Michigan Avenue

Suite, Apt. #, etc.

Suite 407

City & State

Battle Creek Michigan

Zip

49017

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

43-1766227

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

MARX, DONALD G

1503 S McCall Road Unit B

Englewood FL 34223

7. Name and Address of New Registered Agent

Name

Marx, Donald G

Street Address (P.O. Box Number is Not Acceptable)

1503 S McCall Road Unit B

City

Englewood

FL

Zip Code

34223

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE VSD ☐ Delete
 NAME MARX, DONALD G
 STREET ADDRESS P.O. BOX 42
 CITY-ST-ZIP PLACIDA FL 33946-0042

TITLE PTD ☐ Delete
 NAME PRESLER, AARON L
 STREET ADDRESS P 28, RT #4
 CITY-ST-ZIP LAKE LOTAWANA MO 64086

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS 1503 S. McCall Road Unit B
 CITY-ST-ZIP Englewood FL 34223

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)