

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000074895

FILED
Mar 31, 2008
Secretary of State

Entity Name: DATA MARKETING ASSOCIATES EAST, INC.

Current Principal Place of Business:

8801 VISTANA CENTRE DR.
ORLANDO, FL 328216353

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 22197
LAKE BUENA VISTA, FL 328302197

New Mailing Address:

FEI Number: 59-3531162

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: CEO () Delete
Name: GELLEIN, RAYMOND L JR.
Address: 8801 VISTANA CENTRE DR.
City-St-Zip: ORLANDO, FL 328216353

Title: DP () Delete
Name: AVRIL, MATTHEW E
Address: 8801 VISTANA CENTRE DR.
City-St-Zip: ORLANDO, FL 328216353

Title: DSVP () Delete
Name: WERTH, SUSAN SECTY
Address: 8803 VISTANA CENTRE DR.
City-St-Zip: ORLANDO, FL 328216353

Title: DCFO () Delete
Name: FRYMIRE, MICHELLE SVPT
Address: 9102 SOUTH PARKCENTER LOOP
City-St-Zip: ORLANDO, FL 32819

Title: SVP () Delete
Name: CARTER, VICTORIA H AS
Address: 8803 VISTANA CENTRE DR.
City-St-Zip: ORLANDO, FL 328216353

Title: VPAT () Delete
Name: MORROW, PETER
Address: 2231 E. CAMELBACK RD, #400
City-St-Zip: PHOENIX, AZ 86016

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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Name:
Address:
City-St-Zip:

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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: MICHELLE FRYMIRE

DCFO

03/31/2008

Electronic Signature of Signing Officer or Director

Date