

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000053740

FILED
Apr 25, 2009
Secretary of State

Entity Name: CATALOG RETAIL MARKETING INTERNATIONAL, INC.

Current Principal Place of Business:

5824 BEE RIDGE ROAD
SUITE 164
SARASOTA, FL 34233

New Principal Place of Business:

Current Mailing Address:

5824 BEE RIDGE ROAD
SUITE 164
SARASOTA, FL 34233

New Mailing Address:

FEI Number: 65-0928267 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAGAN, STEVEN
5824 BEE RIDGE ROAD
SUITE 164
SARASOTA, FL 34233 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: D () Delete
Name: RAGAN, STEVEN
Address: 5824 BEE RIDGE RD STE 164
City-St-Zip: SARASOTA, FL 34233

Title: D () Delete
Name: WILD, BILL
Address: 5824 BEE RIDGE RD STE 164
City-St-Zip: SARASOTA, FL 34233

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR. (X) Change () Addition
Name: RAGAN, STEVEN D PRESIDE
Address: 5824 BEE RIDGE RD STE 164
City-St-Zip: SARASOTA, FL 34233

Title: MR. (X) Change () Addition
Name: STRECK, TOM
Address: 5824 BEE RIDGE RD STE 164
City-St-Zip: SARASOTA, FL 34233

Title: MR. () Change (X) Addition
Name: SWANSON, JACK P
Address: 5824 BEE RIDGE RD STE 164
City-St-Zip: SARASOTA, FL 34233

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: STEVEN D RAGAN

PRES

04/25/2009

Electronic Signature of Signing Officer or Director

_____ Date