

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S14084

FILED  
Feb 22, 2005  
Secretary of State

Entity Name: MARKETING CONCEPTS, INCORPORATED

**Current Principal Place of Business:**

139 EGRET DRIVE  
JUPITER, FL 334588878 US

**New Principal Place of Business:**

**Current Mailing Address:**

139 EGRET DRIVE  
JUPITER, FL 334588878 US

**New Mailing Address:**

FEI Number: 65-0232053

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ROGOL, MARTIN H.  
139 EGRET DRIVE  
JUPITER, FL 33458 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: DPS ( ) Delete  
Name: ROGOL, MARTIN,  
Address: 139 EGRET DRIVE  
City-St-Zip: JUPITER, FL 33458

Title: DCT ( ) Delete  
Name: CLARKE, KAREN,  
Address: 139 EGRET DRIVE  
City-St-Zip: JUPITER, FL 33458

Title: DVP ( ) Delete  
Name: COMBS, ELIZABETH  
Address: 604 ARDLEIGH DRIVE  
City-St-Zip: AKRON, OH

Title: D ( ) Delete  
Name: CLARKE, CHAD  
Address: 189 EGRET DRIVE  
City-St-Zip: JUPITER, FL 33458

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

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

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

Title: DVP (X) Change ( ) Addition  
Name: COMBS, ELIZABETH  
Address: 604 ARDLEIGH DRIVE  
City-St-Zip: AKRON, OH 44303

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: KAREN CLARKE

CHAI

02/22/2005

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

\_\_\_\_\_  
Date