


FILED  
Mar 20, 2008 8:00 am  
Secretary of State

02-29-2008 90012 013 \*\*\*150.00

2008 FOR PROFIT CORPORATION  
ANNUAL REPORT

DOCUMENT # S45349 1. Entity Name GAMEFISH MARKETING, INC.	
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Principal Place of Business 2101 KNITTLE CR NEW SMYRNA BEACH, FL 32168	Mailing Address 2101 KNITTLE CR NEW SMYRNA BEACH, FL 32168
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66004509



01102008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 65-0263371	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent  
  
WERKING, RALEIGH  
2101 KNITTLE CR  
NEW SMYRNA BEACH, FL 32168

**DO NOT WRITE  
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *R. Working* (NOTE: Registered Agent signature required when resigning) DATE 2.21.08

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WERKING, RALEIGH 2101 KNITTLE CR NEW SMYRNA BEACH, FL 32168
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**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *R. Working* 3/17/08 386-4220834  
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone