2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V28105

Entity Name: T & G MARKETING, INC.

FILED Apr 29, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

12807 LAKE DRIVE EXT. 1 2223 2ND AVENUE NORTH SUITE #102 LAKE WORTH, FL 33461

DELRAY BEACH, FL 33444 US

DELRAY BEACH, FL 33444

Current Mailing Address: New Mailing Address:

US

12807 LAKE DRIVE EXT. 1 2223 2ND AVENUE NORTH SUITE #102 LAKE WORTH, FL 33461 US

FEI Number: 65-0326596 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CONRAD, GLORIA L.

6439 CROOKED STICK COURT

LAKE WORTH, FL 33463 US

CONRAD, GLORIA L VP/SEC

6439 CROOKED STICK COURT

LAKE WORTH, FL 33463 US

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: GLORIA L. CONRAD 04/29/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

 Title:
 PD
 () Delete

 Name:
 CONRAD, THOMAS R.,

 Address:
 6439 CROOKED STICK COURT

 City-St-Zip:
 LAKE WORTH, FL 33463

 Title:
 VSD
 () Delete

 Name:
 CONRAD, GLORIA L.,

 Address:
 6439 CROOKED STICK COURT

 City-St-Zip:
 LAKE WORTH, FL 33463

 Title:
 VTD
 () Delete

 Name:
 CONRAD, RICHARD M

 Address:
 12868 ELLISON WILSON RD

 City-St-Zip:
 JUNO BEACH, FL 33408

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CONRAD, THOMAS R PRES
Address: 6439 CROOKED STICK COURT
City-St-Zip: LAKE WORTH, FL 33463

Title: VSD (X) Change () Addition
Name: CONRAD, GLORIA L VP/SEC
Address: 6439 CROOKED STICK COURT
City-St-Zip: LAKE WORTH, FL 33463

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: GLORIA L. CONRAD VP 04/29/2008