


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2008 08:00 AM
Secretary of State

DOCUMENT # V65519
 1. Entity Name
INTERCON MARKETING, INC.



Principal Place of Business Mailing Address
1540 NORTHGATE BLVD. **46 N. WASHINGTON BLVD. #1**
SARASOTA, FL 34234 **SARASOTA, FL 34236**

DO NOT WRITE IN THIS SPACE



03272008 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For
65-0362600 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
LPS CORPORATE SERVICES, INC
46 NORTH WASHINGTON BLVD.
SUITE 1
SARASOTA, FL 34236

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

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	DPST EBBESON, ANDERS 1540 NORTHGATE BLVD SARASOTA, FL 34234
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP POTTER, KAREN 1540 NORTHGATE BLVD. SARASOTA, FL 34234
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 04/24/08-80070-023 150.00

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:  **ANDERS EBBESON** **4-4-08** **941-355-4488**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #