

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# G29704

**FILED**  
**Feb 14, 2015**  
**Secretary of State**  
**CC2397156098**

**Entity Name:** TWIN STATES MARKETING COMPANY, INC.

**Current Principal Place of Business:**

10293 100 STREET SOUTH  
BOYNTON BEACH, FL 33472-4611

**Current Mailing Address:**

951 SW 4TH AVE.  
BOCA RATON, FL 33432-5803 US

**FEI Number: 59-2523484**

**Certificate of Status Desired: No**

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

BLAKEBERG, JON D.  
C/O BLAKESBERG & CO, CPAS  
951 S.W. FOURTH AVENUE  
BOCA RATON, FL 33432-5803 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name KAUFMAN, GREGORY  
Address 15049 TALL OAK AVE  
City-State-Zip: DELRAY BEACH FL 33446

Title VP  
Name KAUFMAN, SHARON  
Address 15049 TALL OAK AVE  
City-State-Zip: DELRAY BEACH FL 33446

Title VP  
Name SIEGEL, DARYL M  
Address 12055 CLASSIC DRIVE  
City-State-Zip: CORAL SPRINGS FL 33071

*I hereby 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 all other like empowered.*

**SIGNATURE: GREGORY KAUFMAN**

**P**

**02/14/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date