

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K69266

FILED  
Apr 15, 2008  
Secretary of State

Entity Name: CLIMAX MARKETING GROUP, INC.

**Current Principal Place of Business:**

80 FAIRWAY RIDGE  
LAKE WYLIE, SC 29710

**New Principal Place of Business:**

**Current Mailing Address:**

80 FAIRWAY RIDGE  
LAKE WYLIE, SC 29710

**New Mailing Address:**

FEI Number: 65-0122501      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SAVIO, PHILIP A.  
80 FAIRWAY RIDGE  
LAKE WYLIE, FL 29710      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: PD ( ) Delete  
Name: SAVIO, PHILIP,  
Address: 80 FAIRWAY RIDGE  
City-St-Zip: LAKE WYLIE, SC 29710

Title: VT ( ) Delete  
Name: SAVIO, PHILIP,  
Address: 80 FAIRWAY RIDGE  
City-St-Zip: LAKE WYLIE, SC 29710

Title: S ( ) Delete  
Name: SAVIO, LORI  
Address: 80 FAIRWAY RIDGE  
City-St-Zip: LAKE WYLIE, SC 29710

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

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

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

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: PHILIP SAVIO

PD

04/15/2008

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

\_\_\_\_\_ Date