

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000030754

FILED  
Apr 16, 2007  
Secretary of State

Entity Name: P.M. ECKMAN ADVERTISING, INC.

**Current Principal Place of Business:**

44 SE FIRST AVENUE STE 207  
OCALA, FL 34471

**New Principal Place of Business:**

**Current Mailing Address:**

44 SE FIRST AVENUE STE 207  
OCALA, FL 34471

**New Mailing Address:**

FEI Number: 59-3372398

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ECKMAN, P M  
44 SE FIRST AVENUE STE 207  
OCALA, FL 34471 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: P ( ) Delete  
Name: ECKMAN, PETER M  
Address: 44 SE 1ST AVE., #207  
City-St-Zip: OCALA, FL 34471

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

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

Title: D ( ) Change (X) Addition  
Name: ECKMAN, JOEL S  
Address: 44 SE 1ST AVE., #207  
City-St-Zip: OCALA, FL 34471

Title: D ( ) Change (X) Addition  
Name: SIEGEL, JON  
Address: 44 SE 1ST AVE., #207  
City-St-Zip: OCALA, FL 34471

I hereby certify that the information supplied with this filing does not qualify for the 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: PETER M ECKMAN

P

04/16/2007

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

\_\_\_\_\_  
Date