



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

Filing Period: January 1 - March 1 • Filing Fee: \$50.00* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK
* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 141798		2. Name of Corporation INDEPENDENT FINANCIAL MARKETING GROUP, INC.			
3. Street Address Principal Business Office 100 MANHATTANVILLE RD., STE 7			City PURCHASE	State NY	Zip 10577
4. Business Phone No. 617-423-3644		5. State of Incorporation DELAWARE			
6. Brief Description of the Character of Business Conducted in Rhode Island HOLDING CO.					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name DAN ARNOLD			Vice President Name		
Street Address 200 S. COLLEGE STREET, 21 ST FL			Street Address		
City CHARLOTTE	State NC	Zip 28202	City	State	Zip
Secretary Name DAN ARNOLD			Treasurer Name		
Street Address 200 S. COLLEGE STREET, 21 ST FL			Street Address		
City CHARLOTTE	State NC	Zip 28202	City	State	Zip
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name DAN ARNOLD			Director Name		
Street Address 200 S. COLLEGE STREET, 21 ST FL			Street Address		
City CHARLOTTE	State NC	Zip 28202	City	State	Zip
Director Name C. WILLIAM MAHER			Director Name		
Street Address 9785 TOWNE CENTRE DRIVE			Street Address		
City SAN DIEGO	State CA	Zip 92121-1968	City	State	Zip
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1000	Common	\$.01	1000	Common	\$.01
THIS SECTION MUST BE COMPLETED					

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

FILED

File Date: FEB 28 2008

Check No: 19328

By: _____

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature: [Signature] Date: 2/27/08

Print or Type Name: DAN ARNOLD

Title: SECRETARY