



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

A. Ralph Mollis, Secretary of State
Corporations Division
118 W. River Street
Providence, RI 02901-2615
(401) 222-3000

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009

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)(3)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 157068		2. Name of Corporation MarketingSherpa Inc.			
3. Street Address Principal Business Office 499 Main Street			City Warren	State RI	Zip 02809
4. Business Phone No. 401-247-7655		5. State of Incorporation Delaware			
6. Brief Description of the Character of Business Conducted in Rhode Island					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Robert M. Lorum			Vice President Name Flint D. McGlaughlin		
Street Address 499 Main Street			Street Address 412 Boardwalk		
City Warren	State RI	Zip 02809	City Jacksonville Beach	State FL	Zip 32250
Secretary Name Frederick Williams			Treasurer Name David C. Clowe		
Street Address 412 Boardwalk			Street Address 412 Boardwalk		
City Jacksonville Beach	State FL	Zip 32250	City Jacksonville Beach	State FL	Zip 32250
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Flint D. McGlaughlin			Director Name		
Street Address 412 Boardwalk			Street Address		
City Jacksonville Beach	State FL	Zip 32250	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares 3,000	Class Series Common	Par Value \$.01

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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.

File Date **FILED^m**
MAY 15 2009
Check No. **089511**
By: **089511**
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.

Jamelle M. Overby 05/14/09
Signature Date
Jamelle M. Overby
Print or Type Name
Legal Department
Title