

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 284947

FILED
Apr 21, 2004
Secretary of State

Entity Name: MARMAC CONCORD, INC.

Current Principal Place of Business:

1010 W. COLONIAL DRIVE
P.O.BOX 3269
ORLANDO FLA, FL 32802

New Principal Place of Business:

Current Mailing Address:

1010 W. COLONIAL DRIVE
P.O.BOX 3269
ORLANDO FLA, FL 32802

New Mailing Address:

FEI Number: 59-1088344 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCNAMARA-VILLARROEL, MARY ANN
65 INTERLAKEN ROAD
ORLANDO, FL 32804

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: MCNAMARA-VILLARROEL,, MAR
Address: 65 INTERLAKEN RD
City-St-Zip: ORLANDO, FL 00000,

Title: V () Delete
Name: MCNAMARA, HAL B.
Address: 1023 GOLFVIEW STREET
City-St-Zip: ORLANDO, FL

Title: V () Delete
Name: MCNAMARA-MCGEE, MARGARET R.
Address: 2023 COMPANERO AVENUE
City-St-Zip: ORLANDO, FL

Title: ST () Delete
Name: HADD, DENNIS L
Address: 848 SWEETWATER ISLAND CIRCLE
City-St-Zip: LONGWOOD, FL

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:

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MARY ANN MCNAMARA-VILLARROEL
_____ Electronic Signature of Signing Officer or Director

P

04/21/2004

_____ Date