PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G78047

Corporation Name

MARLEY & ASSOCIATES, INC.

Dringing Diago of Business Mailing Address

FILED Jan 23, 1999 8:00am **Secretary of State**

01-23-1999 90063 048 ***150.00



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37 CARRIAGE CREEK WAY ORMOND BEACH FL 32174		37 CARRIAGE CREEK WAY ORMOND BEACH FL 32174		DO NOT WRITE IN THIS SI	PACE		
		,			3. Date Incorporated or Qualifed		
					01/10/1984		
2 Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Applied For	
2. 1111000011	300 01 240020	26			71-0744476	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 Additional Fee Required	
22 State		City & State		·	6. Election Campaign Financing	\$5.00 May Be	
City & State		28			Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Count	ry	8. This corporation owes the current year Intan	gible	
24	25	-, ·			Personal Property Tax.		
14	9. Name and Address of Currer				10. Name and Address of New Registered Ag	jent	
			8	1 Name			
MARLEY, STEPHEN L 37 CARRIAGE CREEK WAY			8	2 Street Ad	dress (P.O. Box Number is Not Acceptable)		
	OND BEACH FL 32174		я	3			
CHIM	OHD BETOILLE GETT		ا ا				
•			8	4 City	FL	85 Zip Code	
		The state of the s	- 100 000	wa namad sa	havita this statement for the number of ch	anging its registered	
office or r agent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State im familiar with, and accept the obligations.	e of Florida. Such change was au ations of, Section 607.0505, Flori	thorized b	by the corporates.	rporation submits this statement for the purpose of ortion's board of directors. I hereby accept the appoint	ment as registered	
SIGNATURE	Signature, typed or printed name of registered age	***************************************		gent signature requ	ired when reinstating) DATE DATE	DIRECTORS IN 12	
12.	·	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND	Change Addition	
TITLE	CPS	☐ DELETE	1.1 TITU				
NAME	MARLEY, STEPHEN L.		1.2 NAM				
STREET ADDRESS			I.	EET ADDRESS			
CITY-ST-ZIP	ORMOND BEACH FL 32174	☐ DELETE		-ST-ZIP		Change Addition	
TITLE	SD	☐ pereie	2.1 TITL	i			
NAME	MARLEY, RUTH A		2.2 NAM	I .			
STREET ADDRESS				EET ADDRESS			
CITY-ST-ZIP	ORMOND BEACH FL 32174	- PELSTS		Y-ST-ZIP		☐ Change ☐ Addition	
TITLE		☐ DELETE	3.1 TITL	i			
NAME			3.2 NAM				
STREET ADDRESS				EET ADDRESS			
CITY-ST-ZIP				Y-ST-ZIP		☐ Change ☐ Addition	
TITLE .		☐ DELETE	4.1 TITL				
NAME			4. 2 NA				
STREET ADDRESS	;			EET ADDRESS			
CITY-ST-ZIP			_	/-ST-ZIP		☐ Change ☐ Addition	
TITLE		☐ DELETE	5.1 TITL	I .			
NAME			5.2 NAA				
STREET ADDRESS	;			EET ADDRESS			
CITY-ST-ZIP				Y-ST-ZIP		Change Addition	
TITLE		☐ DELETE	6.1 TITL			□ Analige □ Addition	
NAME			6.2 NAM				
STREET ADDRESS	5		6.3 STF	REET ADORESS			
	1		■ A (O)T	V OT TIP			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changes, or on an attachment with an address, with all other like empowered.