

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **J54984** (6)

1. Corporation Name  
**THE MARCONI LINE, INC.**



Principal Place of Business: ~~% AURELIUS A. MARCONI 1870 HUNTINGTON LANE ROCKLEDGE FL 32955~~  
Mailing Address: ~~% AURELIUS A. MARCONI 1870 HUNTINGTON LANE ROCKLEDGE FL 32955~~

2. Principal Place of Business: 21 *The Marconi Line*, 22 *1870 Huntington Lane*, 23 *Rockledge, FL*, 24 *32955*, 25 *Brevard*  
2a. Mailing Address: 26 *The Marconi Line*, 27 *1870 Huntington Lane*, 28 *Rockledge, FL*, 29 *32955*, 30 *Brevard*

3. Date Incorporated or Qualified: **02/03/1987**  
3a. Date of Last Report: **04/25/1995**  
4. FEI Number: **59-2785742**  
5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No  
10. Name and Address of New Registered Agent

g. Name and Address of Current Registered Agent: **EADES, FRANCES M. (PRESIDENT) 1870 HUNTINGTON LANE ROCKLEDGE FL 32955**  
81 Name, 82 Street Address (P.O. Box Number is Not Acceptable), 83, 84 City, 85 Zip Code: **FL**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_  
Signature typed or printed name of registered agent and title if applicable (Not: Registered Agent signature required when re-registering)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: PD	EADES, FRANCES, M 1870 HUNTINGTON LANE ROCKLEDGE FL	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: VD	MARCONI, MARK R 1870 HUNTINGTON LN ROCKLEDGE FL	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: T	EADES, JAMES 1870 HUNTINGTON LANE ROCKLEDGE FL	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: S	RAFFAELE, PETER, JR 1870 HUNTINGTON LANE ROCKLEDGE FL	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: VD	MARCONI, ERNEST 1870 HUNTINGTON LANE ROCKLEDGE FL	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: <input type="checkbox"/> DELETE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 changed, or on an attachment with an address.

SIGNATURE: *Frances M. Eades, Pres.* 1-12-96 1-407-639-1130  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)