

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 AM 5:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M79849

(9)

1. Corporation Name-

MARPALM OF FLORIDA, INC.

Principal Place of Business

1755 N CONGRESS AVE
PO BOX 3869
BOYNTON BEACH 33426

Mailing Address

1755 N CONGRESS AVE
PO BOX 3869
BOYNTON BEACH 33426

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/09/1988

3a. Date of Last Report

05/01/1994

4. FEI Number

65-0145707

Applied For

Not Applicable

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 § 199 (3)(
Florida Statutes) ☐ Yes ☐ No

2. Principal Place of Business

21. State, Apt. # etc.

22. City & State

23. Zip

25. Country

2a. Mailing Address

26. State, Apt. # etc.

27. City & State

28. Zip

29. Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CRITCHFIELD, RICHARD H.
1745 N CONGRESS AVE
BOYNTON BEACH FL 33426

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83. City

84. Zip

FL

85. Zip Code

11. Pursuant to the provisions of Sections 866, 867, and 868, Florida Statutes, the undersigned corporation certifies 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 consequences of, as set forth in the Florida Statutes.

SIGNATURE

(Signature of Registered Agent)

(Signature of President or Officer)

(Date)

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

NAME	NAME
NAME	P
NAME	WALSH, MARK
STREET ADDRESS	1755 N CONGRESS AVE
CITY, ST, ZIP	BOYNTON BEACH FL
NAME	V
NAME	WALSH, MICHAEL
STREET ADDRESS	1755 N CONGRESS AVE
CITY, ST, ZIP	BOYNTON BEACH FL
NAME	S
NAME	CRITCHFIELD, RICHARD H.
STREET ADDRESS	1745 N CONGRESS AVE
CITY, ST, ZIP	BOYNTON BEACH FL
NAME	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
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CITY, ST, ZIP	
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NAME	
STREET ADDRESS	
CITY, ST, ZIP	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199 (3)(b), 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 treasurer or business empowered to execute this report as required by Chapter 867, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report or on an attachment with an address.

SIGNATURE:

Mark Walsh
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNED OFFICER OR DIRECTOR

Mark Walsh

4/30/95

407-279-9900