

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000058382

**FILED**  
**Apr 30, 2007**  
**Secretary of State**

**Entity Name:** MARSHALL FAMILY CONSTRUCTION, INC.

**Current Principal Place of Business:**

1717 TENNESSEE AVENUE  
LYNN HAVEN, FL 32444 US

**New Principal Place of Business:**

**Current Mailing Address:**

1717 TENNESSEE AVENUE  
LYNN HAVEN, FL 32444 US

**New Mailing Address:**

FEI Number: 20-4751720

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MARSHALL, JOHN M  
2642 FEROL LANE  
LYNN HAVEN, FL 32444 US

**Name and Address of New Registered Agent:**

MARSHLL, JOHN M  
95 CAROLINA AVENUE  
LYNN HAVEN, FL 32444 US

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: JOHN M. MARSHALL

04/30/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PVST ( ) Delete  
Name: MARSHALL, JOHN M  
Address: 2642 FEROL LANE  
City-St-Zip: LYNN HAVEN, FL 32444 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PVST (X) Change ( ) Addition  
Name: MARSHALL, JOHN M  
Address: 95 CAROLINA AVENUE  
City-St-Zip: LYNN HAVEN, FL 32444 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JOHN M. MARSHALL

PVST

04/30/2007

Electronic Signature of Signing Officer or Director

Date