

**2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11203

**Entity Name:** E. CORNELL MALONE CORPORATION

**Current Principal Place of Business:**

439 DORY STREET  
JACKSON, MS 39201

**Current Mailing Address:**

#1 COMMERCE DRIVE, SUITE 200  
HATTIESBURG, MS 39402 US

**FEI Number:** 64-0677155

**Certificate of Status Desired:** No

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

E C MALONE, LLC  
2550 N. PALAFOX STREET  
PENSACOLA, FL 32501 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            CEO  
Name            MALONE, CORNELL E  
Address        12 TRISTAN WAY  
City-State-Zip: PENSACOLA BEACH FL 32561

Title            PRESIDENT  
Name            MALONE, ROMAN  
Address        439 DORY STREET  
City-State-Zip: JACKSON MS 39201

Title            VP  
Name            MALONE, RYAN  
Address        439 DORY STREET  
City-State-Zip: JACKSON MS 39201

Title            SECRETARY TREASURER  
Name            MALONE, OLIVIA R  
Address        12 TRISTAN WAY  
City-State-Zip: PENSACOLA BEACH FL 32561

*I hereby 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 all other like empowered.*

**SIGNATURE:** OLIVIA R MALONE

**SECRETARY TREASURER** 01/29/2018

Electronic Signature of Signing Officer/Director Detail

Date