

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 194154

FILED
Apr 16, 2009
Secretary of State

Entity Name: THE MARINE SUPPLY & OIL COMPANY

Current Principal Place of Business:

150 RIBERIA STREET
P.O. BOX 173
ST. AUGUSTINE, FL 32085

New Principal Place of Business:

150 RIBERIA STREET
ST. AUGUSTINE, FL 32084

Current Mailing Address:

150 RIBERIA STREET
P.O. BOX 173
ST. AUGUSTINE, FL 32085

New Mailing Address:

P. O. BOX 173
ST. AUGUSTINE, FL 32085

FEI Number: 59-0773688

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DARRELL R. POLI
150 RIBERIA STREET
ST AUGUSTINE, FL 32084 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: POLI, NORMA C.
Address: 42 VALENCIA STREET
City-St-Zip: ST. AUGUSTINE, FL

Title: VD () Delete
Name: POLI, DARRELL R.
Address: 89 MAGNOLIA AVE
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: ST () Delete
Name: POLI, JOANNA M
Address: 89 MAGNOLIA AVE
City-St-Zip: SAINT AUGUSTINE, FL 32084

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: POLI, DARRELL R.
Address: 89 MAGNOLIA AVE.
City-St-Zip: ST. AUGUSTINE, FL 32084 US

Title: VD (X) Change () Addition
Name: DE MELLO, CHARLES D.
Address: 138-B OVIEDO ST.
City-St-Zip: ST. AUGUSTINE, FL 32084 US

Title: ST (X) Change () Addition
Name: POLI, JOANNA M
Address: 89 MAGNOLIA AVE
City-St-Zip: ST. AUGUSTINE, FL 32084 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: DARRELL R. POLI

PD

04/16/2009

Electronic Signature of Signing Officer or Director

_____ Date