

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Jan 30, 2007 8:00 am**  
**Secretary of State**

01-30-2007 90011 012 \*\*\*150.00

DOCUMENT # 436956

1. Entity Name

MARCELLO PROPERTIES, INCORPORATED



Principal Place of Business  
162 SE CAMP ST  
LAKE CITY FL 32025

Mailing Address  
162 SE CAMP ST  
LAKE CITY FL 32025



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-1507049

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

1st MOORE

CR2E034 (10/06)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

COUEY, ADELAIDE  
162 SE CAMP ST  
LAKE CITY FL 32025

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Adelaide Couey*

01/19/07

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when registering)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2007 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD  
NAME COUEY, ADELAIDE E ☐ Delete  
STREET ADDRESS 162 SE CAMP ST  
CITY- ST- ZIP LAKE CITY FL 32025

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE SD  
NAME COUEY, KEVIN JOHN ☐ Delete  
STREET ADDRESS ~~RT 7 BOX 753-4~~  
CITY- ST- ZIP LAKE CITY FL 32055

TITLE ☒ Change ☐ Addition  
NAME 5013 B SINE Gum Swamp Rd  
STREET ADDRESS Lake City, FL 32055  
CITY- ST- ZIP

TITLE TD  
NAME COUEY, KEITH E JR ☐ Delete  
STREET ADDRESS 162 SE CAMP ST  
CITY- ST- ZIP LAKE CITY FL 32025

TITLE ☒ Change ☐ Addition  
NAME 138 SE Tucker ST  
STREET ADDRESS Lake City, FL 32025  
CITY- ST- ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Adelaide Couey*

01/19/07

386-752-6473

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

System's Page 4