

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 518549

Entity Name: M.D.M. MARBLE CO., INC.

FILED  
Apr 08, 2008  
Secretary of State

**Current Principal Place of Business:**

3040 INDUSTRIAL 33RD ST  
FT. PIERCE, FL 34946

**New Principal Place of Business:**

**Current Mailing Address:**

3040 INDUSTRIAL 33RD ST  
FT. PIERCE, FL 34946

**New Mailing Address:**

FEI Number: 59-1701416

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BOYD, CURTIS J  
302 S 2 STREET  
FORT PIERCE, FL 34950 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: P ( ) Delete  
Name: WILLIAMS, CHARLES  
Address: 7086 TORREY PINES CIR.  
City-St-Zip: PORT SAINT LUCIE, FL 349863200

Title: VP ( ) Delete  
Name: THOMPSON, CARLENE M  
Address: 7086 TORREY PINES CIRCLE  
City-St-Zip: PORT ST LUCIE, FL 34986

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: CHARLES WILLIAMS

P

04/08/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date