

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 23, 2007 08:00 AM
Secretary of State

DOCUMENT # F06000007593

1. Entity Name
MARKER 29 PRODUCE, INC.



Principal Place of Business

**4-B NORTH STREET
ONANCOCK, VA 23417**

Mailing Address

**P.O. BOX 301
ONANCOCK, VA 23417**

DO NOT WRITE IN THIS SPACE



02052007 No Chg-P CR2E034 (11/05)

4. FEI Number

54-0458114

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145**

**DO NOT WRITE
IN THIS SPACE**

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

n/a

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

(NOTE: Registered Agent signature required when reinstating)

000000644821

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

03/02/07-80059-017 150.00

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CHRM
CODY, STEVE
24290 FINNEYS WHARF ROAD
ONANCOCK, VA 23417**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
CODY, STEVE
24290 FINNEYS WHARF ROAD
ONANCOCK, VA 23417**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VCHR
CODY, JENNIE J
24290 FINNEYS WHARF ROAD
ONANCOCK, VA 23417**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
CODY, JENNIE J
24290 FINNEYS WHARF ROAD
ONANCOCK, VA 23417**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**ST
BROOKS, JERRY R
16291 COUNTRY CLUB ROAD
MELFA, VA 23410**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Jerry R. Brooks **Jerry R. Brooks**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/5/07 (757) 787-1000

Date

Daytime Phone #