

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2008 08:00 AM
Secretary of State

DOCUMENT # H20952 1. Entity Name MARGIE'S ANTIQUE MARKET PLACE, INC.	
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Principal Place of Business C/O MARJORIE M. WIERENGO 2216 MARTIN LUTHER KING BLVD FORT MYERS, FL 33901 US	Mailing Address C/O MARJORIE M. WIERENGO 2216 MARTIN LUTHER KING BLVD FORT MYERS, FL 33901 US
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04182008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2462924	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

WELCH, M M
2216 MARTIN LUTHER KING BLVD
FORT MYERS, FL 33901

**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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	WIERENGO, ROGER L.
STREET ADDRESS	4301 13TH STREET WEST
CITY-ST-ZIP	LEHIGH ACRES, FL 33971
TITLE	STV
NAME	WELCH, MARGIE
STREET ADDRESS	1904 BETHANY PLACE
CITY-ST-ZIP	NAPLES, FL 34109
TITLE	D
NAME	WELCH, JAMES W
STREET ADDRESS	1904 BETHANY PLACE
CITY-ST-ZIP	NAPLES, FL 34109
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000932140
05/22/08-80041-016 150.00

**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: *W. Welch* *4/24/08* *2397773008*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #