

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 17, 2006 08:00 AM
Secretary of State

DOCUMENT # H23467		
1. Entity Name MARSUD, INC.		

Principal Place of Business 1285 16TH STREET VERO BEACH FL 32960	Mailing Address 1285 16TH STREET VERO BEACH FL 32960
--	--



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E034 (10/05)

4. FEI Number **59-2455000** Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**GAULT, DOUGLAS L.
1285 16TH STREET
VERO BEACH FL 32960**

7. Name and Address of New Registered Agent

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.

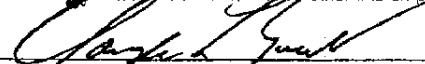
SIGNATURE _____ (Signature, typed or printed name of registered agent and his or her applicable) (NOTE: Registered Agent signature required when reconstituting) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 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	DP	☐ Delete		TITLE	000000437682	☐ Change	☐ Addition
NAME	GAULT, DOUGLAS L.			NAME	02/28/06-80054-014	150.00	
STREET ADDRESS	1285 16TH STREET			STREET ADDRESS			
CITY-ST-ZIP	VERO BEACH FL			CITY-ST-ZIP			
TITLE	S	☐ Delete		TITLE		☐ Change	☐ Addition
NAME	GAULT, DAUGLAS			NAME			
STREET ADDRESS	1285 16TH ST			STREET ADDRESS			
CITY-ST-ZIP	VERO BEACH FL			CITY-ST-ZIP			
TITLE	VT	☐ Delete		TITLE		☐ Change	☐ Addition
NAME	GAULT, SUZANNE			NAME			
STREET ADDRESS	1285 16TH ST			STREET ADDRESS			
CITY-ST-ZIP	VERO BEACH FL			CITY-ST-ZIP			
TITLE		☐ Delete		TITLE		☐ Change	☐ Addition
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE		☐ Delete		TITLE		☐ Change	☐ Addition
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE		☐ Delete		TITLE		☐ Change	☐ Addition
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				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:  **DOUGLAS L. GAULT** 2/10/06 772-567-0271

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR