

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J05132

FILED  
Apr 07, 2009  
Secretary of State

Entity Name: OLD MARSH REALTY COMPANY

**Current Principal Place of Business:**

7610 OLD MARSH ROAD  
PALM BEACH GARDENS, FL 33418

**New Principal Place of Business:**

**Current Mailing Address:**

7610 OLD MARSH ROAD  
PALM BEACH GARDENS, FL 33418

**New Mailing Address:**

FEI Number: 59-2700997

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WHITE, WILTON L  
625 N FLAGLER DR. 9TH FLOOR  
POST OFFICE DRAWER E  
WEST PALM BEACH, FL 33401 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: VP ( ) Delete  
Name: DALFONSO, JOSEPH  
Address: 225 EVERGLAD AVE #2  
City-St-Zip: PLAM BEACH GARDENS, FL 33480

Title: P ( ) Delete  
Name: DELPIT, LARRY D  
Address: 7618 OLD MARSH RD  
City-St-Zip: PLM BCH GRDNS, FL 33418

Title: T ( ) Delete  
Name: CHRISTOVICH, STEVEN  
Address: 180 E. OCEAN BLVD. STE. 1010  
City-St-Zip: LONG BEACH, CA 90802

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

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

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: STEVEN CHRISTOVICH

T

04/07/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date