

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K33753

FILED  
Jan 27, 2009  
Secretary of State

Entity Name: MARCO POLO REALTY, INC.

## Current Principal Place of Business:

2400 S. W. HWY 484  
OCALA, FL 34473 US

## New Principal Place of Business:

## Current Mailing Address:

2400 S. W. HIGHWAY 484  
OCALA, FL 34473 US

## New Mailing Address:

FEI Number: 59-2909776

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

POWERS, ALBINA  
4260 SW 58TH AVE  
OCALA, FL 34474 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: POWERS, ALBINA  
Address: 4260 SW 58TH AVE  
City-St-Zip: OCALA, FL 34474

Title: VS ( ) Delete  
Name: PAVICIC, KATICA (2ND, )  
Address: 3310 SW 58TH STREET  
City-St-Zip: OCALA, FL 34474

Title: V ( ) Delete  
Name: POWERS, LANCE  
Address: 4260 SW 58TH AVE  
City-St-Zip: OCALA, FL 34474

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: POWERS, ALBINA  
Address: 4260 SW 58TH AVE  
City-St-Zip: OCALA, FL 34474

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

Title: VP (X) Change ( ) Addition  
Name: POWERS, LANCE  
Address: 4260 SW 58TH AVE  
City-St-Zip: OCALA, FL 34474

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: ALBINA POWERS

P

01/27/2009

Electronic Signature of Signing Officer or Director

Date