FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

MARMCO, INC.	8/4/1 8/8/1 8/8/1 8/8/1 18/1
Principal Place of Business Mailing Address	01644 04011 01911 01411 1801
2030 MCGREGOR BLVD 2030 MCGREGOR BLVD	
FT. MYERS FL 33901 FT. MYERS FL 33901	00105
DO NOT WRITE IN THIS 3. Date Incorporated or Qualified	SP'ACE
3. Date intol perated of Qualified 9. 98/30/1989	
2. Principal Place of Business 2a. Mailing Address 4. FEI Number	Applied For
26 65-0142103	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired	\$8.75 Additional
22 2026 Wilna Street 27 2026 Wilna Street	Fee Required
City & State 6. Election Campaign Financing	\$5.00 May Be
23 Fort Myers, FL 28 Fort Myers, FL Trust Fund Contribution	Added to Fees
Zip Country 20 33901 30 Series Support	rent year Intangible ☐ Yes ☐ No
24 25 29 39 30 Personal Property Tax due June 30. L	
WALKER, MARY JO	
A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
2030 MCGREGOR BLVD FT MYERS FL 33901 Street Address (P.O. Box Number is Not Acceptable) 2026 Wilna Street	
83	
84 City	85 Zip Code
Fort Myers FL	33901
Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appraign. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, types or pointed name of registered agent and billed applicable (NOTE Registered Agent signature required when reinstating) DATE	ointment as registered
12. OF ICERS AND DIRECTORS 13. ADDITIONS/CHANGES 10 OFFICERS AND	
DO D	
TITLE PD DELETE 1.1 TITLE	DIRECTORS IN 12 Change Addition
NAME WALKER, MARY JO 1.2 NAME	
NAME WALKER, MARY JO 1.2 NAME STREET ADDRESS 3913 MCGREGOR BLVD. 1.3 STREET ADDRESS	
NAME WALKER, MARY JO 1.2 NAME STREET ADDRESS 3913 MCGREGOR BLVD. 1.3 STHEET ADDRESS CITY-ST-ZIP FT MYERS FL 1.4 CITY-ST-ZIP	
NAME WALKER, MARY JO 1.2 NAME STREET ADDRESS 3913 MCGREGOR BLVD. 1.3 STREET ADDRESS CITY-ST-ZIP FT MYERS FL 1.4 CITY-ST-ZIP TITLE VD DELETE 21 TITLE	Change Addition
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NAME WALKER, MARY JO	Change Addition Change Addition
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14. Thereby certify that the information supplied with this filling does not quality for the exemption stated in Section 119.07(3)(9), Florida Statutes. I further certify that the informatio indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same logal effect as if made under eath; that I am an officer or director of the corporation or the roceiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, or on an attachment with an address.

14-18-02 44/3248681

FILED

Apr 21 1998 8:00am

Secretary of State