2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2009
Secretary of State

DOCUMENT# L78877

Entity Name: MARLYN INVESTMENTS, INC.

Current Principal Place of Business:

482 SW PORT ST. LUCIE BLVD
PORT ST LUCIE, FL 34953

New Principal Place of Business:

2407 SW MONTERREY LN
PORT ST LUCIE, FL 34953

Current Mailing Address:

482 SW PORT ST. LUCIE BLVD
PORT ST LUCIE, FL 34953

New Mailing Address:

2407 SW MONTERREY LN
PORT ST LUCIE, FL 34953

FEI Number: 65-0210809 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PETRUZZELLI, PHILIP
482 SW PORT ST LUCIE BLVD
PORT ST LUCIE, FL 34953 US

Name and Address of New Registered Agent:

PETRUZZELLI, PHILIP
2407 SW MONTERREY LN
PORT ST LUCIE, FL 34953 US

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: PHIL PETRUZZELLI 02/16/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: PETRUZZELLI, PHILIP,
Address: 482 SW PORT ST LUCIE BLV
City-St-Zip: PORT ST LUCIE, FL 34953

Title: VSD (X) Delete
Name: PETRUZZELLI, MARILYN,
Address: 482 SW PORT ST LUCIE BLV
City-St-Zip: PORT ST LUCIE, FL 34953

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: PETRUZZELLI, PHILIP,
Address: 482 SW PORT ST LUCIE BLV
City-St-Zip: PORT ST LUCIE, FL 34953

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: PHIL PETRUZZELLI P 02/16/2009
Electronic Signature of Signing Officer or Director Date