

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002743

FILED
Aug 14, 2006
Secretary of State

Entity Name: MARTY'S MEN, INC.

Current Principal Place of Business:

P.O. BOX 7884
LAKELAND, FL 338077884 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 7884
LAKELAND, FL 338077884 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MOBERG, MARK R
6582 EUREKA SPRINGS ROAD
VANDENBERG AIRPORT
TAMPA, FL 33610 US

Name and Address of New Registered Agent:

WILHELM, GREG T
1005 S. FLORIDA AVENUE
LAKELAND, FL 33803 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: GREG WILHELM

08/14/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JONES, TODD
Address: P.O. BOX 7884
City-St-Zip: LAKELAND, FL 33807 US

Title: VP () Delete
Name: MOBERG, MARK
Address: P.O. BOX 7884
City-St-Zip: LAKELAND, FL 33807 US

Title: VP () Delete
Name: JONES, PAUL
Address: P.O. BOX 7884
City-St-Zip: LAKELAND, FL 33807 US

Title: T () Delete
Name: WILHELM, GREG
Address: P.O. BOX 7884
City-St-Zip: LAKELAND, FL 33807 US

Title: S () Delete
Name: SHANNON, JOHN
Address: P.O. BOX 7884
City-St-Zip: LAKELAND, FL 33807 US

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:

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

Title: S (X) Change () Addition
Name: PAHL, KRIS
Address: P.O. BOX 7884
City-St-Zip: LAKELAND, FL 33807 US

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KRIS PAHL

S

08/14/2006

Electronic Signature of Signing Officer or Director

Date