

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000101430

Entity Name: ZOE MARINE, INC.

FILED
Apr 22, 2005
Secretary of State

Current Principal Place of Business:

P.O.BOX 2430 PMB 2227
PENSACOLA, FL 32513

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 2430 PMB 2227
PENSACOLA, FL 32513

New Mailing Address:

FEI Number: 59-3679001

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARSH, W. DOUGLAS
410 WEST NINE MILE ROAD
PENSACOLA, FL 32534 US

Name and Address of New Registered Agent:

MARSH, W. DOUGLAS
428 CHILDERS STREET
PENSACOLA, FL 32534 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: W. DOUGLAS MARSH

04/22/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MARSH, KAY
Address: P.O.BOX 2430 PMB 2227
City-St-Zip: PENSACOLA, FL 32513

Title: ST () Delete
Name: MARSH, W. DOUGLAS
Address: P.O.BOX 2430 PMB 2227
City-St-Zip: PENSACOLA, FL 32513

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 for the exemption stated in Section 119.07(3)(i), 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: W. DOUGLAS MARSH

S/T

04/22/2005

Electronic Signature of Signing Officer or Director

Date