


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**

**Feb 09, 2006 08:00 AM  
Secretary of State**

<b>DOCUMENT # P04000025798</b>		
1. Entity Name MARSTAN PROPERTIES, INC.		
Principal Place of Business 3197 NE 272ND AVE OLD TOWN, FL 32680	Mailing Address P O BOX 1535 OLD TOWN, FL 32680	
<b>DO NOT WRITE IN THIS SPACE</b>		
6. Name and Address of Current Registered Agent  MCNEW, MARY ANN 3197 NE 272ND AVE OLD TOWN, FL 32680		<b>DO NOT WRITE IN THIS SPACE</b>
8. 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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE: <u>Mary Ann McNew - P</u> <u>MARY ANN MCNEW</u> <u>2-8-06</u> <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-filing)</small> DATE		
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MCNEW, MARY ANN P 3197 NE 272ND AVE OLD TOWN, FL 32680	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/S WEAVER, STANLEY M T/S 253 NE 770TH ST. OLD TOWN, FL 32680	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <u>Mary Ann McNew</u> <u>2-8-06</u> <u>352-542-0235</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> Date      Daytime Phone #		



02082006 No Chg-P CR2E034 (11/05)

4. FEI Number 38-3696818	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	

U00000425506  
02/20/06-60001-002 158.75

**DO NOT WRITE  
IN THIS SPACE**