

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000099087

Entity Name: MARSH CAY, INC.

**FILED**  
**Apr 26, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

2251 ST. JOHNS BLUFF RD SOUTH  
JACKSONVILLE, FL 32246

**New Principal Place of Business:**

**Current Mailing Address:**

2251 ST. JOHNS BLUFF RD SOUTH  
JACKSONVILLE, FL 32246

**New Mailing Address:**

FEI Number: 56-2468290

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SHEA, JOHN W  
2251 ST. JOHNS BLUFF RD SOUTH  
JACKSONVILLE, FL 32095 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: SHEA, TIMOTHY G  
Address: 2251 ST. JOHNS BLUFF ROAD S  
City-St-Zip: JACKSONVILLE, FL 32246

Title: D  
Name: CARLSON, FREDERICK W  
Address: 2251 ST. JOHNS BLUFF ROAD S  
City-St-Zip: JACKSONVILLE, FL 32246

Title: D  
Name: SHEA, JOHN W  
Address: PO BOX 1589  
City-St-Zip: PONTE VEDRA, FL 32004

I hereby 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 all other like empowered.

SIGNATURE: JOHN W. SHEA

D

04/26/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date