

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000108469

FILED
Sep 06, 2007
Secretary of State

Entity Name: MELTON'S MARINE SERVICES INCORPORATED

Current Principal Place of Business:

814 SAINT KITTS COVE
NICEVILLE, FL 32578 US

New Principal Place of Business:

Current Mailing Address:

814 SAINT KITTS COVE
NICEVILLE, FL 32578 US

New Mailing Address:

FEI Number: 20-3252397

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HICKMAN, JAMES A
220 GOVERNMENT ST
STE 1
NICEVILLE, FL 32578 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MELTON, WILLIAM W
Address: 814 SAINT KITTS COVE
City-St-Zip: NICEVILLE, FL 32578 US

Title: SEC () Delete
Name: MELTON, JANE
Address: 814 SAINT KITTS COVE
City-St-Zip: NICEVILLE, FL 32578 US

Title: DIR (X) Delete
Name: LEURINI, MICHAEL J
Address: 1910 REDWOOD AVE
City-St-Zip: NICEVILLE, FL 32578 US

Title: DIR (X) Delete
Name: LEECH, BILL L
Address: 1628 ROYAL PALM DR
City-St-Zip: NICEVILLE, FL 32578 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:

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: WILLIAM W MELTON

PRES

09/06/2007

Electronic Signature of Signing Officer or Director

_____ Date