

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000028262

**FILED**  
**Mar 02, 2010**  
**Secretary of State**

**Entity Name:** RALPH A. MARSTON INVESTIGATIONS, INC.

**Current Principal Place of Business:**

321 NORTHLAKE BLVD.  
SUITE 110  
NORTH PALM BEACH, FL 33408 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 14035  
NORTH PALM BEACH, FL 334084035 US

**New Mailing Address:**

**FEI Number:** 26-4558499

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MARSTON, RALPH A  
321 NORTHLAKE BLVD.  
SUITE 110  
NORTH PALM BEACH, FL 33408 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** MARSTON, RALPH A  
**Address:** P.O. BOX 14035  
**City-St-Zip:** NORTH PALM BEACH, FL 334084035 US

**Title:** STD  
**Name:** GRIFFITH, JOAN  
**Address:** P.O. BOX 14035  
**City-St-Zip:** NORTH PALM BEACH, FL 334084035 US

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:** JOAN GRIFFITH

STD

03/02/2010

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

\_\_\_\_\_  
Date