

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000090541

Entity Name: MAREC CORPORATION

**FILED**  
**Feb 25, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

967 CHAPMAN LP  
THE VILLAGES, FL 32162 US

**New Principal Place of Business:**

**Current Mailing Address:**

967 CHAPMAN LP  
THE VILLAGES, FL 32162 US

**New Mailing Address:**

FEI Number: 27-3847481

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CLEAVES, MARY A  
967 CHAPMAN LP  
THE VILLAGES, FL 32162 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: P  
Name: CLEAVES, MARY A  
Address: 967 CHAPMAN LP  
City-St-Zip: THE VILLAGES, FL 32162 US

Title: VP  
Name: CLEAVES, ROBERT E  
Address: 967 CHAPMAN LP  
City-St-Zip: THE VILLAGES, FL 32162 US

Title: SEC  
Name: CLEAVES, SARAH N  
Address: 9757 TRANQUILITY CIRCLE, UNIT 111  
City-St-Zip: RIVERVIEW, FL 32162

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: MARY ANN CLEAVES

PRES

02/25/2011

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

\_\_\_\_\_  
Date