

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

APPROVED  
AND  
FILED

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

06 MAY 10 PM 6:19

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P94000070315 (4)

1. Corporation Name

MARCO-ROACH, INC.



Principal Place of Business

Mailing Address

210 GOVERNMENT AVENUE  
SUITE B  
NICEVILLE FL 32578  
US

1506 23RD ST  
NICEVILLE FL 32578

3. Date Incorporated or Qualified

09/23/1994

3a. Date of Last Report

07/14/1995

2. Principal Place of Business

2a. Mailing Address

21 1506 23rd ST.

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

City & State

27 City & State

23

Niceville, FL

28

Zip

Country

24

32578

Country

29 Zip

Country

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MARCOLONGO, MICHAEL  
1506 23RD ST  
NICEVILLE FL 32578

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Michael Marcolongo

(NOTE: If a signed document is required when registering)

5/3/96  
DATE

12. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

D  
MARCOLONGO, MICHAEL  
1506 23RD ST  
NICEVILLE FL 32578

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

D  
ROACH, DANIEL J  
471 OLDE POST RD  
NICEVILLE FL 32578

☒ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY - ST - ZIP

7000001827617  
-05/17/96--01114--001  
\*\*\*\*225.00 \*\*\*\*225.00

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY - ST - ZIP

☐ Change ☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY - ST - ZIP

☐ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY - ST - ZIP

☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY - ST - ZIP

☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Michael Marcolongo  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/3/96  
DATE

Daytime Phone #

CR2E034 (12/95)