## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

## 03-19-2008 90141 001 \*\*\*300.00 DOCUMENT # P94000071114 MARLYN STEEL DECKS, INC. Principal Place of Business Mailing Address **6808 HARNEY ROAD 6808 HARNEY ROAD** 66004415 TAMPA, FL 33610 TAMPA, FL 33610 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01212008 Chg-P CR2F034 (12/06) 4. FEI Number Applied For City & State City & State 59-3277428 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name JAMES, RICHARD R Street Address (P.O. Box Number is Not Acceptable) 6808 HARNEY ROAD TAMPA, FL 33610 Zip Code City 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Change ☐ Addition PD TITLE ☐ Delete TITLE JAMES, RICHARD R. NAME NAME STREET ADDRESS 6808 HARNEY ROAD STREET ADDRESS TAMPA, FL CITY-ST-ZIP CITY-ST-ZIP TITLE 1 R. Christopher JAMES VD TITLE ☐ Delete ☐ Addition JAMES, R.C. 6808 HARney STREET ADDRESS 6808 HARNEY ROAD STREET ADDRESS TAMPA, FL 33610 CITY-ST-ZIP CITY-ST-ZIP STD TETLE Delete ☐ Addition JAMES, EVELYN K NAME NAME STREET ADDRESS 6808 HARNEY ROAD STREET ADDRESS CITY-ST-ZIP **TAMPA, FL 33610** CITY-ST-ZIP TITLE **ASTV** ☐ Delete TITI F ☐ Change Addition JAMES, JEANNIE S NAME NAME STREET ADDRESS 6808 HARNEY ROAD STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33610 CITY-ST-ZIP ☐ Change TITLE Delete TITLE Addition JAMES, JEANNIE S. NAME STREET ADDRESS 6808 HARNEY ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TAMPA, FL TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

GNING OFFICER OR DIRECTOR

GNATURE AND TYPED OR PRINTED NAME OF

FILED Mar 19, 2008 8:00 am

Secretary of State

Daytime Phone #