

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 11, 2004 8:00 am
Secretary of State

03-11-2004 90015 025 ***150.00

DOCUMENT # P97000021023

1. Entity Name
MARSDEN BROS. INTRACOASTAL LAWN CARE, INC.



Principal Place of Business
1301 GROVELAND ST.
VENICE, FL 34292

Mailing Address
P.O. BOX 1173
VENICE, FL 34284

2. Principal Place of Business
2655 Valencia Road
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
Venice FL

City & State

Zip
34293 Country
USA

Zip Country

03082004 Chg-P CR2E034 (10/03)

4. FEI Number
65-0735919 Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

MARSDEN, WILLIAM
1301 GROVELAND ST.
VENICE, FL 34292

7. Name and Address of New Registered Agent

Name **John Marsden**

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

2655 Valencia Rd.

City **Venice** **FL** Zip Code **34293**

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 **John Marsden** **John Marsden President** **3/8/04**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

T ☐ Delete
NAME **MARSDEN, JOHN**
STREET ADDRESS **55 HATCHETT CREEK RD**
CITY-ST-ZIP **VENICE, FL 34292**

P ☒ Delete
NAME **MARSDEN, WILLIAM**
STREET ADDRESS **1301 GROVELAND ST.**
CITY-ST-ZIP **VENICE, FL 34292**

☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete
NAME
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NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☒ Change ☐ Addition
NAME **PRESIDENT**
NAME **MARSDEN, JOHN**
STREET ADDRESS **2655 Valencia Rd.**
CITY-ST-ZIP **Venice FL 34293**

☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: **John Marsden** **John Marsden** **3/8/04** **941-480-1610**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #