

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Jan 26, 2006 8:00 am**  
**Secretary of State**

01-26-2006 90028 045 \*\*\*150.00

**DOCUMENT # P99000031872**

1. Entity Name

**D. MARSH ENTERPRISES, INC.**



Principal Place of Business

**P.O. BOX 1624  
TRENTON FL 32693**

Mailing Address

**P.O. BOX 1624  
TRENTON FL 32693**



2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**59-3571677**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75-Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**MARSH, DAWN F  
2739 S.W. 19TH CIRCLE  
TRENTON FL 32693**

7. Name and Address of New Registered Agent

Name

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

City

**FL**

Zip Code

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00.**

**After May 1, 2006 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete  
NAME **P**  
STREET ADDRESS **MARSH, DAWN F**  
CITY-ST-ZIP **PO BOX 1624  
TRENTON FL 32693**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☒ Addition  
NAME **V**  
STREET ADDRESS **marsh, Robert P.**  
CITY-ST-ZIP **P.O. Box 1624  
Trenton, FL 32693**

TITLE ☐ Change ☒ Addition  
NAME **D**  
STREET ADDRESS **Hausner, Ryan L.**  
CITY-ST-ZIP **P.O. Box 1624  
Trenton, FL 32693**

TITLE ☐ Change ☒ Addition  
NAME **M**  
STREET ADDRESS **Christina M. Clark**  
CITY-ST-ZIP **P.O. Box 1624  
Trenton, FL 32693**

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

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

SIGNATURE: **Dawn F Marsh** **DAWN F MARSH** **1/26/06** **352-493-0332**

ATTACHMENT

60006180

#P 990000 31872

Dawn F. Marsh  
PO Box 1737  
Trenton FL 32693-1737

To Whom It May Concern:

I am sorry, I wrote

Christina M. Clark &

it should have been

Clark, Christina M.

Also please note that

in May Christina's

new last ~~for~~ name

will be Hausner

so Hausner, Christina M

after May 20th 2006.

Thank You,  
Dawn F. Marsh

