

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 21, 2008 8:00 am**  
**Secretary of State**

07-21-2008 90027 017 \*\*\*558.75

**DOCUMENT # P99000048943**

1. Entity Name  
**BLUE MARLIN HOLDINGS, INC.**



Principal Place of Business  
**5640 TARPON COURT  
MILTON, FL 32583**

Mailing Address  
**5640 TARPON COURT  
MILTON, FL 32583**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address



Suite, Apt. #, etc.

Suite, Apt. #, etc.

07152008

Chg-P

CR2E034 (12/06)

City & State

City & State

4. FEI Number

**59-3642845**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired



**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**SHELL, STEPHEN B  
NINTH FLOOR, SEVILLE TOWER  
226 PALAFOX PLACE  
PENSACOLA, FL 32501**

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 \$550.00  
Due by September 12, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete  
NAME **LEADER, MELVIN R JR**  
STREET ADDRESS **5640 TARPON COURT**  
CITY - ST - ZIP **MILTON, FL 32583**

TITLE **D** ☒ Delete  
NAME **DOYLE, PETER**  
STREET ADDRESS **1776 YATES AVE.**  
CITY - ST - ZIP **PENSACOLA, FL 32503**

TITLE **D** ☐ Delete  
NAME **WILLIAMS, ROBERT L**  
STREET ADDRESS **3650 OLD SHELL ROAD**  
CITY - ST - ZIP **MOBILE, AL 36608**

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  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☒ Change ☐ Addition  
NAME **KAREN DENISE ROGERS**  
STREET ADDRESS **6751 CREEL RD.**  
CITY - ST - ZIP **THEODORE, AL 36682**

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

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 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.

SIGNATURE:

**MELVIN R LEADER JR** 7/19/08 850-501-5642  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #