

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P99000056442

1. Entity Name
MAR-KEY CONSTRUCTION, INC.



Principal Place of Business

2045 NOTTINGHAM DR
WINTER PARK, FL 32792 US

Mailing Address

P.O. BOX 575
WINTER PARK, FL 32790 US

FILED

05 AUG 25 PM 3:47

SECRET
TALLAHASSEE, FLORIDA



08232005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3582100

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HUFF, MARIA
2045 NOTTINGHAM DRIVE
WINTER PARK, FL 32792

**DO NOT WRITE
IN THIS SPACE**

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
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE D
NAME HUFF, MARIA
STREET ADDRESS 2045 NOTTINGHAM DR
CITY-ST-ZIP WINTER PARK, FL 32792

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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200059388222
09/07/05--01026--026 **158.75

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

8-23-05 321-228-3453