

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S04361

FILED
Apr 14, 2009
Secretary of State

Entity Name: MARCELL'S CONSTRUCTION, INC.

Current Principal Place of Business:

2525 OLD HICKORY TREE RD.
ST. CLOUD, FL 34772

New Principal Place of Business:

Current Mailing Address:

2525 OLD HICKORY TREE RD.
ST. CLOUD, FL 34772

New Mailing Address:

FEI Number: 59-3027069

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEWMAN, WILLIAM JAMES, III
2525 HICKORY TREE RD.
ST. CLOUD, FL 34772 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: NEWMAN, WILLIAM J., III
Address: 2525 OLD HICKORY TREE RD.
City-St-Zip: ST. CLOUD, FL

Title: T () Delete
Name: THRECA L NEWMAN
Address: 2475 OLD HICKORY TREE RD
City-St-Zip: ST CLOUD, FL

Title: S () Delete
Name: AMY L NEWMAN
Address: 2525 OLD HICKORY TREE RD
City-St-Zip: ST CLOUD, FL 34772

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: NEWMAN, WILLIAM J., III
Address: 2525 OLD HICKORY TREE RD.
City-St-Zip: ST. CLOUD, FL 34772 US

Title: T (X) Change () Addition
Name: THRECA L NEWMAN
Address: 2475 OLD HICKORY TREE RD
City-St-Zip: ST CLOUD, FL 34772 US

Title: S (X) Change () Addition
Name: AMY L NEWMAN
Address: 2525 OLD HICKORY TREE RD
City-St-Zip: ST CLOUD, FL 34772 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AMY L NEWMAN

S

04/14/2009

Electronic Signature of Signing Officer or Director

Date