

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S38600

Entity Name: MISS MARTHA, INC.

FILED  
Jun 23, 2009  
Secretary of State

## Current Principal Place of Business:

233 WATER STREET  
APALACHICOLA, FL 323201734

## New Principal Place of Business:

## Current Mailing Address:

P O BOX 697  
APALACHICOLA, FL 323290697 US

## New Mailing Address:

FEI Number: 59-3060019

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SHULER, J. GORDON  
34 - 4TH STREET  
APALACHICOLA, FL 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

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: WARD, WALTER MACK  
Address: 2620 BLUFF ROAD  
City-St-Zip: APALACHICOLA, FL 32320

Title: ST ( ) Delete  
Name: WARD, RACHEL L  
Address: 2620 BLUFF RD  
City-St-Zip: APALACHICOLA, FL 32320

Title: DP ( ) Delete  
Name: WARD, THOMAS L  
Address: 137 LONG ROOD  
City-St-Zip: APALACHICOLA, FL 32320

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: WALTER M WARD

D

06/23/2009

Electronic Signature of Signing Officer or Director

Date