

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S38600

Entity Name: MISS MARTHA, INC.

**FILED**  
**Apr 19, 2011**  
**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

**OFFICERS AND DIRECTORS:**

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

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

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

I hereby 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 all other like empowered.

SIGNATURE: WALTER M. WARD SR.

D

04/19/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date