

**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 01, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # S42407</b> 1. Entity Name <b>MARY MINING COMPANY, INC.</b>	
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Principal Place of Business <b>201 N FRANKLIN STREET 2200 TAMPA, FL 33602</b>	Mailing Address <b>PO BOX 21 TAMPA, FL 33601</b>
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**DO NOT WRITE IN THIS SPACE**



01092008 No Chg-P CR2E034 (11/05)

4. FEI Number <b>65-0254548</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

**MCLEAN, WILLIAM C. JR.  
201 N FRANKLIN STREET  
2200  
TAMPA, FL 33602**

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

**9. Election Campaign Financing**  **\$5.00** May Be Added to Fees  
 Trust Fund Contribution.

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT MCLEAN, WILLIAM C JR 201 N FRANKLIN STREET TAMPA, FL 33602
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS DENKER, CLAUDIA 303 SKYLINE DRIVE MISSOULA, MT 59802
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000810217  
 02/08/08-80057-006 150.00

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**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:** *William C. McLean, Jr.* **1/29/08** **(813) 273-5050**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #  
**William C. McLean, Jr.**