

**DOCUMENT # V39909**  
Name  
**G MARBLE INC.**

731604



DO NOT WRITE IN THIS SPACE

1. Place of Business  
**STREET NORTH  
FL 33470**

2. Mailing Address  
**18604 49TH STREET NORTH  
LOXAHATCHEE FL 33470-2350  
US**

3. Mailing Address  
Suite, Apt. #, etc.

City & State

4. FEI Number **65-0334424**

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**MCGEENEY, THOMAS JR.  
18604 49TH STREET NORTH  
LOXAHATCHEE FL 33470**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

Some entities submit this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

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

Registration is eligible to satisfy its Intangible Tax requirements and elects to do so. (Details on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

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

OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
<b>PD</b> <b>MCGEENEY, THOMAS J JR.</b> <b>18604 49TH STREET NORTH</b> <b>LOXAHATCHEE FL 33470</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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CR2E034 (9/99)

I 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 for 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 or on an attachment with an address, with all other like empowered.

**SIGNATURE:** *Thomas McGeeney Jr.* **Thomas McGeeney Jr** **4/27/00** **561-791-2591**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #