Feb 22, 1999 8:00 am Secretary of State

02-22-1999 90122 003 ***150.00

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00,

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 576212							
1. Surporation (same							
ADVANCE MARINE OF JACKSONVILLE, INC.							
1							
		***				i didil didil didil d	3811 81811 1881
Principal Place of Business Mailing Address							
9451 CRAVEN ROAD 9451 CRAVEN ROAD							-
JACKSONVILLE	FL 3225/	JACKSONVILLE FL 32257			DO NOT WRITE IN TH	IS SPACE	
					3. Date Incorporated or Qualifed		
					06/19/1978		
2. Principal P	ace of Business	2a. Mailing Address		4. FEI Number	App	olied For	
21 26		26			59-1830646	No	t Applicable
		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 A	
22		27				Fee Re	
City & State		City & State		6. Election Campaign Financing	\$5.00		
23	Country Zip		Country		Trust Fund Contribution	Added to	o rees
Zip				This corporation owes the current year Personal Property Tax.		□No	
24	25 29 3 9. Name and Address of Current Registered Agent		30[- "-	10. Name and Address of New Registere		
	J. Hallie and Hadress of California		81	Name !			
HAS'	tings, L. Gerald			- · · · ·	di Co O Di Mantanta Na di Anna da Mantanta Na		
3166 JULINGTON CREEK ROAD			82	Street A	ddress (P.O. Box Number is Not Acceptable)		
Jacksonville FL 32223			83		100		
			0.4	O'h		. 85 Zip C	`odo
			84	City	F	L 85 Zip C	Joue
 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporat office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's 					orporation submits this statement for the purpose	of changing its	registered
office or re agent. I a	egistered agent, or both, in the State on familiar with, and accept the obligat	of Florida. Such change was au ions of, Section 607.0505, Flori	ithorized by t ida Statutes.	he corpor	ation's board of directors. I hereby accept the app	ontment as rec	gistered
SIGNATURE					•		
	Signature, typed or printed name of registered agent			signature req	uired when reinstating) DATE		50.41.40
12.	OFFICERS ANI	D DIRECTORS	13.	ľ	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO Change	Addition
TITLE	PD CERVE		1.1 TITLE			□ change	☐ Addition
NAME	HASTINGS, L. GERALD		1.2 NAME				
STREET ADDRESS	3166 JULINGTON CREEK RD.		1.3 STREET ADDRESS				
CITY-ST-ZIP	JACKSONVILLE FL	☑ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		· · · · · · · · · · · · · · · · · · ·	Change	Addition
TITLE	SD	Adecere					
NAME	HASTINGS, L. GERALD		2.2 NAME 2.3 STREET ADDRESS				
STREET ADDRESS	3166 JULINGTON CREEK RD.		2.4 CITY-ST-ZIP				
CITY-ST-ZIP	JACKSONVILLE FL	☐ DELETE	3.1 TITLE			Change	Addition
NAME	STD Jennings, Patricia		3.2 NAME			2	_
	852-COUNTY-ROAD		3.3 STREET ADDRESS		5731 County Road 35.	2.	
STREET ADDRESS	KEYSTONE HEIGHTS FL		3.4. CITY-ST-ZIP		0 , 0 , 000 , , , , , , , , , , , , , ,	_	
CITY-ST-ZIP	RETOTORE FIELDING FE	☐ DELETE	4.1 TITLE		V	Change	Addition
NAME			4.2 NAME		J. DARRELL COLEMAN		, ,
STREET ADDRESS			4.3 STREET ADDRESS 7		4325 BANKS Rd		
CITY-ST-ZIP					Middleburg, FL 32068	•	
TITLE		☐ DELETE	5.1 TITLE			Change	☐ Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			5.4 CITY-ST-ZIP				
TITLE	DELETE 6.1 TI		6.1 TITLE			Change	☐ Addition
NAME			6.2 NAME	1			
STREET ADDRESS			6.3 STREET	ADDRESS			

14. I hereby 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 indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

904 730 3335