## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

**1996**DOCUMENT #

SIGNATURE

F93000004460 (2)

CONBULK STEVEDORING & TERMINAL SERVICES, INC.

Principal Place of Business Mailing Address P.O. BOX 2253 P.O. BOX 2253 SAVANNAH GA 31402 SAVANNAH GA 31402 3a. Date of Last Report 3. Date Incorporated or Qualified 09/27/1993 08/11/1995 4. FFI Number Applied For 2a. Mailing Address 2. Principal Place of Business Not Applicable 58-2063230 26 21 \$8.75 Additional Suite, Apt. #, etc. Surte, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 \$5.00 May Be 6. Election Campaign Financing City & State Oity & State Trust Fund Contribution Added to Fees 28 23 8. This corporation has liability for intangible tax under s. 199.032, Country Zφ Zip Yes No Florida Statutes 30 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name Street Address (P.O. Box Number is Not Acceptable) BURCH, KEN 1921 HECKSCHER DRIVE 83 JACKSONVILLE FL 32226 Zip Code City 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of Section 607.0505, Florida Statutes. Phillip Holy Server April Squara in April White Signature, typed or protectionable of registroot agost as of the flavolle don ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DELETE Change Addition 1 1 TITLE TITLE 1.2 NAME PEEPLES, FRANK K NAME 1.3 STHEET ADDRESS 6001 CHATHAM CENTER DRIVE, SUITE 350 STREET ADDRESS 14 CITY - ST - ZIP SAVANNAH GA CITY - ST - ZIP Change Addition 2.1 TITLE THIF 2.2 NAME MAYFIELD, E. GAY NAME 2.3 STREET ADDRESS 6001 CHATHAM CENTER DRIVE, SUITE 350 STREET ADDRESS SAVANNAH GA 24 C-TY - ST - ZIP CITY-ST-ZIP Change Addition 3 I THILE TITLE 3.2 NAME STROUSE, DEBRA M NAME 6001 CHATHAM CENTER DRIVE, SUITE 350 3.3 STREET ADDRESS STREET ADDRESS SAVANNAH GA 31405 3.4 CITY - ST - ZIP CITY-ST-ZIP Add-tion Change 4 1 1111.6 TITLE 4.2 NAM-NAME BENTON, JOHN R JR 4.3 STREET ADDRESS 6001 CHATHAM CENTER DRIVE, SUITE 350 STREET ADDRESS 4.4 CIT r - ST - ZP SAVANNAH GA 31405 CITY-ST-ZIP Addition ☐ DELETE 5 1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 Cilly - ST - ZiF CITY -ST-ZIP Change Addition 6 1 THEF TIFLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 OEY - ST - ZIP CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 eath, that I am an officer and 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

4/16/96 236-1865

(12/95)

CR2E034