

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

**APPROVED
AND
FILED**

1997 JUN 30 AM 9:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. McMath
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000083409 (1)
1. Corporation Name
MUDDOBBERS, INC.



Principal Place of Business: RT 5 BOX 600 WATSON BLVD BIG PINE KEY FL 33043
Mailing Address: RT 5 BOX 600 WATSON BLVD BIG PINE KEY FL 33043-9682

2. Principal Place of Business
21 30750 WATSON BLVD
22 City & State
23 Zip Country
24 25 26 27 28 29 30

3. Date Incorporated or Qualified: 11/29/1993
3a. Date of Last Report: 05/01/1996
4. FEI Number: 65-0457921
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
MOORE, RUSSELL D
RT 5 BOX 600
WATSON BLVD
BIG PINE KEY FL 33043

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 30750 WATSON BLVD
83 City
84 FL 85 Zip Code

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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.
SIGNATURE: Russell D. Moore
DATE: 4-29-97

12. OFFICERS AND DIRECTORS

TITLE	PSTD	<input type="checkbox"/> DELETE
NAME	MOORE, RUSSELL D	
STREET ADDRESS	RT 5 BOX 600/WATSON BLVD	
CITY-ST-ZIP	BIG PINE KEY FL 33043	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	LINDERMAN, JERRY	
STREET ADDRESS	30750 WATSON BLVD	
CITY-ST-ZIP	BIG PINE KEY FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	CONNELLY, STEPHEN S	
STREET ADDRESS	RT 5 BOX 600/WATSON BLVD	
CITY-ST-ZIP	BIG PINE KEY FL 33043	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PSTD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	MOORE, RUSSELL	
1.3 STREET ADDRESS	30750 WATSON BLVD	
1.4 CITY-ST-ZIP	BIG PINE KEY, FL. 33043	
2.1 TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	KEVIN CORROY	
2.3 STREET ADDRESS	P.O. Box 430189	
2.4 CITY-ST-ZIP	BIG PINE KEY, FL 33043-0189	N/A
3.1 TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	CONNELLY, STEPHEN S	
3.3 STREET ADDRESS	30855 ORTEGA LANE	
3.4 CITY-ST-ZIP	BIG PINE KEY, FL 33043	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	900002230543	
4.3 STREET ADDRESS	-07/03/97-01130-010	
4.4 CITY-ST-ZIP	****165.00 ****165.00	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.

SIGNATURE: Russell D. Moore DATE: 4-29-97

CR2E034 (9/96)