

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

**APPROVED AND FILED**

55 MAY -1 PM 2:36

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995

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

DOCUMENT # **488166** (0)

1. Corporation Name:  
**THE LOADING DOCK, INC.**

Principal Place of Business: **100 MADISON STREET TAMPA FL 33602**

Mailing Address: **100 MADISON STREET TAMPA FL 33602**

2. Principal Place of Business: **21** State: **FL** City & State: **22** City: **TAMPA** State: **FL**

2a. Mailing Address: **26** State: **FL** City & State: **27** City: **TAMPA** State: **FL**

23. City & State: **28** City: **TAMPA** State: **FL**

24. City: **25** State: **FL** City & State: **29** City: **TAMPA** State: **FL**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **10/23/1975**

3a. Date of Last Report: **03/03/1994**

4. FEI Number: **59-1629895**

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. 193.032, Florida Statute:  Yes  No

9. Name and Address of Current Registered Agent

**DOWD, HENRY R  
C/O 100 MADISON ST  
TAMPA FL 33801**

10. Name and Address of Now Registered Agent

81. Name: \_\_\_\_\_

82. Street Address (P.O. Box Number is Not Acceptable): \_\_\_\_\_

83. \_\_\_\_\_

84. City: \_\_\_\_\_

85. Zip Code: **FL**

11. Pursuant to the provisions of Sections 602.01(1), (2), and 602.17(1)(B), Florida Statute, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, on the date 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 responsibilities of Sections 602.01(1), (2), and 602.17(1)(B), Florida Statute.

SIGNATURE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>P</b>	13. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>ROWE, H. DEAN</b>	13. NAME	
STREET ADDRESS	<b>11401 CARROLLWOOD DR.</b>	13. STREET ADDRESS	
CITY & STATE	<b>TAMPA FL</b>	13. CITY & STATE	
TITLE	<b>T</b>	13. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>ROWE, RICHELLE DIAN</b>	13. NAME	
STREET ADDRESS	<b>11401 CARROLLWOOD DR.</b>	13. STREET ADDRESS	
CITY & STATE	<b>TAMPA FL</b>	13. CITY & STATE	
TITLE	<b>S</b>	13. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>ROWE, KARLENE K</b>	13. NAME	
STREET ADDRESS	<b>11401 CARROLLWOOD DR</b>	13. STREET ADDRESS	
CITY & STATE	<b>TAMPA FL</b>	13. CITY & STATE	
TITLE	<b>VD</b>	13. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>ROWE, RICK D</b>	13. NAME	
STREET ADDRESS	<b>11401 CARROLLWOOD DR</b>	13. STREET ADDRESS	
CITY & STATE	<b>TAMPA FL</b>	13. CITY & STATE	
TITLE	<b>VD</b>	13. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>ROWE, LINDA D</b>	13. NAME	
STREET ADDRESS	<b>11401 CARROLLWOOD DR</b>	13. STREET ADDRESS	
CITY & STATE	<b>TAMPA FL</b>	13. CITY & STATE	
TITLE		13. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		13. NAME	
STREET ADDRESS		13. STREET ADDRESS	
CITY & STATE		13. CITY & STATE	

14. I do hereby certify that the information supplied with this filing is accurately furnished and does not qualify for the exemption stated in Sections 110.01(1)(b), Florida Statute. I further certify that the information is filed on the annual report or biennial report or quarterly report as true and accurate and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the receiver or trustee or assignee to execute this report as required by Chapter 602, Florida Statute, and that my name appears on Block 12 of this document, or on an attachment with an address.

SIGNATURE: *[Signature]*

4/30/95 81325325320