


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

FILED
Jun 17 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # M26751 (1) 1. Corporation Name MARTIN ENERGY SERVICES COMPANY					
Principal Place of Business 301 MAPLE AVENUE P.O. BOX 1460 PANAMA CITY FL 32402			Mailing Address 301 MAPLE AVENUE P.O. BOX 1460 PANAMA CITY FL 32402-1460		
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 01/31/1986 3a. Date of Last Report 04/26/1996 4. FEI Number 59-2571115 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent MCINTYRE, JAMES E. 301 MAPLE AVENUE PANAMA CITY FL 32402			10. Name and Address of New 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 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering) DATE					
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	CD	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MARTIN, RUBEN S. III		1.2 NAME		
STREET ADDRESS	101 E. SABINE		1.3 STREET ADDRESS		
CITY-ST-ZIP	KILGORE TX		1.4 CITY-ST-ZIP		
TITLE	V	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	CHRISTMAS, R. BRUCE		2.2 NAME		
STREET ADDRESS	301 MAPLE AVE.		2.3 STREET ADDRESS		
CITY-ST-ZIP	PANAMA CITY FL 32402		2.4 CITY-ST-ZIP		
TITLE	DAS	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SKELTON, WESLEY M.		3.2 NAME		
STREET ADDRESS	101 E. SABINE		3.3 STREET ADDRESS		
CITY-ST-ZIP	KILGORE TX		3.4 CITY-ST-ZIP		
TITLE	DP	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MCINTYRE, J. E.		4.2 NAME		
STREET ADDRESS	301 MAPLE		4.3 STREET ADDRESS		
CITY-ST-ZIP	PANAMA CITY FL		4.4 CITY-ST-ZIP		
TITLE	T	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BONDURANT, ROBERT D		5.2 NAME		
STREET ADDRESS	101 E. SABINE		5.3 STREET ADDRESS		
CITY-ST-ZIP	KILGORE TX 75062		5.4 CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			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)(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 of this report, or on an attachment with an address.

SIGNATURE:

[Handwritten Signature] 6/3/97 9A 572 6100

CR2E034 (9/96)