I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

VP

SIGNATURE: CHRISTINA MILLER

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# P16000011338

Entity Name: 1ST CHOICE MARINE OF ST AUGUSTINE INC

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

404 SOUTH RIBERIA STREET ST AUGUSTINE, FL 32084

Current Mailing Address:

404 SOUTH RIBERIA STREET ST AUGUSTINE. FL 32084

FEI Number: 81-1344393

Name and Address of Current Registered Age

MILLER, JAMES O 404 SOUTH RIBERIA STREET ST AUGUSTINE, FL 32084 US

The above named entity submits this statement for the purpose of ch

SIGNATURE:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	Ρ	Title	VP
Name	MILLER, JAMES O	Name	MILLER, CHRISTINA A
Address	404 SOUTH RIBERIA STREET	Address	404 SOUTH RIBERIA STREET
City-State-Zip:	ST AUGUSTINE FL 32084	City-State-Zip:	ST AUGUSTINE FL 32084

C	Certificate of Status Desired:	No
jent:		
changing its registered office or register	ed agent, or both, in the State of Florida.	

FILED Jan 19, 2017 Secretary of State CC0767012422

Date

01/19/2017

Date