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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

ANNU	RPORATION JAL REPORT 1998	DI	Sandra B. Mortham Secretary of State DIVISION OF CORPORATION			Secret	ary of S	State
1. Corporatio	MENT # 54289 MARINE COMPANY	93	(3)					
								EN ALIAN NER
Principal Place	e of Business	Mailing Add	ress				îl Bibil Olou Gibil Bibil Ol	DEN ØNDEN FOCE
9550 REGENCY SQUARE BLVD 1717 ARCH ST STE 400 35 FL								
JACKSONVILI	E FL 32225		PHILADELPHIA PA 19103-768			DO NOT WRITE IN THIS SPACE		
UŞ		US	US			3. Date Incorporated or Qualified		
2. Principal P	ace of Business	2a. Mailing A	ddress			08/12/1977 4. FEI Number		pplied For
21	ood of population	26				23-2050731	—— 	lot Applicable
Suite, Apt.	#, etc.	Suite, Ap	t. #, etc.			5. Certificate of Status Desired		Additional
22	<u> </u>	27	 				Fee R	lequired
City & State	9	City & Str	910			Etection Campaign Financing Trust Fund Contribution	C	May Be
Zip	Country	Zip		Country		This corporation owes or has pa		
24	25	29	3	o o		Personal Property Tax due June		□ No
	9. Name and Address of Curr	rent Registered Age	nt			10. Name and Address of New Re	gistered Agent	
	CORPORATION SYSTEM	_		81	Name			[
1200 SOUTH PINE ISLAND ROAD					Street Add	dress (P.O. Box Number is Not Acceptab	de)	
PLANTATION FL 33324								
				83				
				84	City		FL 85 Zip	Code
11. Pursuant l	o the provisions of Sections 607.0	502 and 607.1508, F	lorida Statutes	, the above	-named cor	rporation submits this statement for the p	urnose of changing i	its registered
office of re agent. I a	e gister ed agent, or bo th, in the Sta m familiar with, and accept the obl	ate of Florida. Such c ligations of, Section (hange was aut 307.05 <mark>05,</mark> Ftoric	horized by da Statules	the corpora	ation's board of directors. I hereby accep	it the appointment as	s registered
SIGNATURE								
12,	Signature, typed or printed name of registered OFFICERS A	agent and fille if applicable	(NOTE: I	tegistered Age	nt signature requ	uired when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE	ES IN 12
TITLE	PD		DELETE	1.1 HILE	····	PRESIDENT	Change	Addition
NAME	JETT, DONALD W.			1.2 NAME	j	1 200	_ •	
STREET ADDRESS	9550 REGENCY SQUARE I	BLVD		1.3 STREET	ADDRESS			18
CITY-ST-ZIP	JACKSONVILLE FL			1.4 City - St	-7IP			
TITLE	S DELETE			2.1 TITLE			Change	Addition C
NAME	SEIDERS, JOSEPH R.			2.2 NAME				1
STREET ADDRESS	1717 ARCH ST PHILADELPHIA PA			2.3 STREET	Ĭ			ł
TITLE	AT		DELETE	2. 4 CITY - S 3.1 TITLE	1-202		Change	Addition
NAME	MARKLEY, THOMAS R.	_	- ·	3.2 NAME	1			
STREET ADDRESS	1717 ARCH ST			3.3 STREET	ADDRESS			
CITY-ST-ZIP	PHILADELPHIA PA			3.4. CITY - S	T- ZIP			
TITLE	AS		DELETE	4.1 TITLE	ĺ		☐ Change	Addition
NAME	LEWIS, CRAIG H.			4. 2 NAMÉ				1
STREET ADDRESS	1717 ARCH ST PHILADELPHIA PA			4.3 STREET	1			
CITY-ST-ZIP	TVPD		DELETE	4.4 CITY - ST 5.1 TITLE	- 2117	TVP	Change	Addition
NAME	ONUR, EROL A	_		5.2 NAME	}	, ,		
STREET ADDRESS	9550 REGENCY SQUARE E	BLVD		5.3 STREET	ADDRESS			
CITY-ST-ZIP	JACKSONVILLE FL			5.4 CITY - ST	- ZIP			
TITLE			DELETE	61 TITLE	1	DIRECTOR MITCH WIENICK MIT ARCH ST	☐ Change	Addition
NAME				6.2 NAME	/	vitch, WIENICK		
STREET ADDRESS				6.3 STREET	NOORESS 🐧	MIN ARCH ST		

14. I 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 if changed, or on an attachment with an address.

1 115/6910

FILED

Jan 29 1998 8:00am