

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Corporation Secretary
Tallahassee, Florida
32399-0001

APPROVED
AND
FILED

DOCUMENT # 633527

(7)

1. Corporation Name

OCEAN TOWING & SALVAGE, INC.

FILED
MAY 19 1995
TALLAHASSEE, FLA

2. Principal Place of Business
4080 RICH ROAD
GREEN COVE SPRINGS FL 32043

3. Mailing Address
4080 RICH ROAD
GREEN COVE SPRINGS FL 32043

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Created 08/23/1979	3a. Date of Last Report 05/19/1994
4. FEI Number 59-2035533	Applied For ☐ Not Applicable
5. Certificate of State Desired ☒	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation is subject to regulation by Chapter 607, Florida Statutes. ☐ Yes ☒ No	

21. State Agent # 1st	26. Mailing Agent # 1st
22. State Agent # 2nd	27. Mailing Agent # 2nd
23. City & State	28. City & State
24. Zip	29. Zip
25. Country	30. Country

9. Name and Address of Current Registered Agent

SCHREIBER, GERHARDT A.
890 S. DIXIE HWY.
CORAL GABLES FL 33146

10. Name and Address of New Registered Agent

81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	
84. State	FL
85. Zip Code	

11. Pursuant to the provisions of Sections 607.05(2) 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. Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

(Signature of Registered Agent or Registered Agent's Designee)

(Signature of Registered Agent or Registered Agent's Designee)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. NAME	PD PATTERSON, JOHN G.	1. NAME	☐ Change ☐ Addition
2. STREET ADDRESS	4080 RICH RD.	2. STREET ADDRESS	
3. CITY, ST, ZIP	GREEN COVE SPNG, FL	3. CITY, ST, ZIP	
4. NAME		4. NAME	☐ Change ☐ Addition
5. STREET ADDRESS		5. STREET ADDRESS	
6. CITY, ST, ZIP		6. CITY, ST, ZIP	
7. NAME		7. NAME	☐ Change ☐ Addition
8. STREET ADDRESS		8. STREET ADDRESS	
9. CITY, ST, ZIP		9. CITY, ST, ZIP	
10. NAME		10. NAME	☐ Change ☐ Addition
11. STREET ADDRESS		11. STREET ADDRESS	
12. CITY, ST, ZIP		12. CITY, ST, ZIP	
13. NAME		13. NAME	☐ Change ☐ Addition
14. STREET ADDRESS		14. STREET ADDRESS	
15. CITY, ST, ZIP		15. CITY, ST, ZIP	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(9)(a), Florida Statutes. Further, I 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 it changed, or on an attachment with an address.

SIGNATURE:

Teresa A. Patterson *John A. Patterson* 4/26/95 284-0447 (904)

SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR