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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(0)

MARBIT INCORPORATED

FILED Apr 30 1998 8:00am Secretary of State



| | | | | HAN CITA BIBN BIBN BIBN BIBN BIBN NAN |
|--|---|---|---|---|
| Principal Place of Business | Mailing Address | | | |
| ••P •• BOX 100000− | P O BOX 160306 | | | |
| MOBILE AL 38616 | | DO NOT WRITE IN THIS SPACE | | |
| | | | 3. Date Incorporated or Qualified | |
| | | | 12/28/1976 | |
| 2. Principal Place of Business | 2a. Mailing Address | | 4. FEI Number | Applied For |
| 21 Colonial Bank Centr | | | 63-0718313 | Not Applicable |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | \$8.75 Additional |
| 22 41 North Beltine H | City & State | | | Fee Required |
| 23 Nobile AL | 28 | | Election Campaign Financing Trust Fund Contribution | \$5.00 May Be |
| Zip Country | Zip | Country | B. This corporation owes or has | |
| 24 36608 - 120 25 | <u> </u> | 30 | Personal Property Tax due Jui | - 1 |
| 9. Name and Address of | of Current Registered Agent | | 10. Name and Address of New F | |
| DICKSON, MAX L. | | 81 Name | | |
| 7200 N 9TH AVE- | | 82 Street | Address (P.O. Box Number is Net Accept | able) |
| - OUITE 6 - | | Address (P.O. Box Number, is Not Accept | 8 | |
| - PENSAOOLA FL 32504 → | | 83 | •• | |
| 4 | | 84 Ciby | | 85 Zip Code |
| | | 101 | ng q colq, | FL 132503-4950 |
| Pursuant to the provisions of Sections office or registered agent, or both, in | s 607.0502 and 607.1508, Florida Statute the State of Florida. Such change was a | | corporation submits this statement for the poration's board of directors. I hereby acc | purpose of changing its registered lept the appointment as registered |
| agent. I am familiar with, and accept | the obligations of, Section 607.0505, Flor | rida Statutes | , | , |
| SIGNATURE Signature, typed or printed name of re | MOTE STATE OF THE PROPERTY OF | Barrier American | | |
| | CERS AND DIRECTORS | Registered Agent signature | ADDITIONS/CHANGES TO OFF | ICERS AND DIRECTORS IN 12 |
| TITLE PD | DELETE | 1.1 TITLE | | Change Addition |
| NAME SAINT , JOHN B. | | 1.2 NAME | | hit hil. |
| STREET ADDRESS - 451-BELTLINE HWY S |). | 1.3 STREET ADDRESS | WELLIAM TO NOT INDO | Timenignway |
| CITY-ST-ZIP - MOBILE AL | | 1.4 CITY-ST-ZIP | Mobile, AL 36608 | -1201 |
| TITLE . 8 | ☐ DELETE | 2.1 TITLE | | Change Addition |
| NAME WESCH, PAUL C. | | 2.2 NAME | 14 11.44 9.141 2011 | Lamel |
| STREET ADDRESS - 451 BELTLINE HWY C |) | 23 STREET ADDRESS | TI NOMIN DEITTIMP ITIG | nuvy. |
| CITY-ST-ZIP WIBILE AL | | 2 4 CITY-ST-ZIP | 41 North Boltling Hig Mobile, AL 36608-11 | 01 |
| | ☐ DELETE | 3 1 TITLE | | Change L Addition |
| NAME ISHEE, WILLIAM H. STREET ADDRESS - 651 BELTLINE 11WY S | Ħ | 3 2 NAME | 41 North Rolling History | ,, |
| -MODILE AL- | • | 3.3 STREET ADDRESS | 41 North Boltline Highway Mobile, AL 36608-120 41 North Beltline Highway | ζ, |
| TITLE VD | DELETE | 3.4. CITY-ST-ZIP 4.1 TITLE | 1100115/HV 70008-180 | Change Addition |
| NAME KELLY, JR. DONALD I | | 4.1 IIILE 4. 2 NAME | | Change L. Audition |
| STREET ADDRESS - 451 DELTLINE HWY-S | | 4. 2 NAME 4.3 STREET ADDRESS | 4-1 North Beltling Hichu | Vajt |
| City-st-zip -MODILE AL- | | 4.4 CITY - ST - ZIP | Mobile Al 36600-120 | Í |
| TITLE YD | DELETE | 5.1 TITLE | 1 10 10 10 10 10 10 10 10 10 10 10 10 10 | Change Addition |
| NAME STEFAN, CHESTER J. | | 5.2 NAME | | |
| STREET ADDRESS - 451 BELTINE HWY 3: | | 5.3 STREET ADDRESS | 41 North Beltline High | vay |
| CITY-ST-ZIP -MOBILE AL- | | 5.4 CITY-ST-ZIP | Mobile, AL 36608-100 41 North Beltline Highw Mobile, AL 36604-18 | ÓI |
| TITLE | ☐ DELETE | 6.1 TITLE | 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - | Change Addition |
| NAME | | 6.2 NAME | | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | | |
| CITY-\$1-ZIP | | 6.4 CITY-ST-ZIP | | |
| 14 I hereby certify that the information ou | wolled with this filing does not availed for | | d in Castina 110 07/0\/i\ Elavida Ctatutas | 1.6 (1 |

I nereby 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.