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

PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of Stato

FILED Jun 03 1997 8:00am Secretary of State

| 1 | 1997 | DIVISION OF COR | PORATIO | SNC | | 2 | | |
|---------------------------------------|---|---|----------------------------|---------------------------------------|---|-------------------------------------|--------------------------|---------------|
| DOCUN 1. Corporation PINE ISLA | MENT # F49156 AND DOCK, INC. | (5) | | | | | | |
| | | ÷ | | | | 11 6 11 116 11 1464 1 | | |
| Principal Place | of Rusiness | Mailing Address | | | | ANDRI QUANT CITTI I | | (1811 IBD) |
| , | ELLOW BOULEVARD | 9856-8 STRINGFELLOW BOULE ST. JAMES CITY FL 33956-3109 | | | i : | | | |
| | |) . | | | 3. Date Incorporated or Qualified 10/09/1981 | 3a. Date 0 06/18/ | of Last R 1996 | oport |
| ~~ · | ace of Business | 2a. Mailing Address | | | 4. FEI Number | | | oplied For |
| Suite, Apt. # | t atc | Suite, Apt #, etc. | | | 59-2222602 | | | ot Applicable |
| 2 | | 27 | | | 5. Certificate of Status Desired | | Fee Re | ' |
| City & State | | City & State | | | Election Campaign Financing Trust Fund Contribution | | \$5.00 Added 1 | |
| Zip 4 | Country 25 | Zip 30 | Country | , | 8. This corporation has liability for Florida Statutes | intangible tax Yes | | . 199.032, |
| | 9. Name and Address of Currer | | | · · · · · · · · · · · · · · · · · · · | 10. Name and Address of New Re | gistered Age | nt | |
| | PATTERSON | | 81 | Name | | | | |
| | PERKINS LANE | | 82 | Street Add | fress (P.O. Box Number is Not Acceptab | ole) | | |
| ST. JA | NMES CITY FL 33956 | | 00 | | | | | |
| | | | 83 | } | | | | |
| | | | 84 | City | | FL | 35 Zip (| Code |
| 11. Pursuant to | the provisions of Sections 607.050 | 2 and 607 1508 Florida Statutes I | he abov | e-named cor | rogration submits this statement for the r | | anging it | s registered |
| office or re | gistered agent, or both, in the State | of Florida, Such change was auth | orized by | the corpora | rporation submits this statement for the partion's board of directors. Thereby acceptions | of the appoint | lment as | registered |
| SIGNATURE 4 | r lambal vitis, and accops the obilg | | | | | Zf- | 7 | |
| 5 | ilgnature (and or punted name of registered age | | uistered Age | all ginalure requ | | | | |
| 12. | OFFICERS AN | D DIRECTORS | 13. | | ADDITIONS/CHANGES TO OFFICE | | | |
| | PATTERSON, DIANNE M. | ☐ DELETE | 1.1 1111.6 | { | | L | Change | Addition |
| · · · · · · · · · · · · · · · · · · · | 3852 PERKINS LN. | | 1.2 NAME 1.3 STREET | toposee | | | | • |
| | ST. JAMES CITY FL 33956 | | | 1 | | | | |
| prii-bi-gii | PAS | DELETE | 2.1 TOLE | 11-71 | | | Change | Addition |
| | PATTERSON, MARK A. | | 22 NAME | | | | _ | |
| | 3852 PERKINS LN. | | 2.3 STREET | ADDRESS | | | | |
| CITY-ST-ZIP | ST. JAMES CITY FL 33956 | | 2 4 CHTY-1 | ST-ZIP | | | | |
| TITLE | 7 | ☐ DELETE | 3.1 TITLE | | | | Change | Addition |
| | PATTERSON, MARK A. | | 3.2 NAME | ļ | | | | |
| | 3852 PERKINS LN. ST. JAMES CITY FL 33956 | ľ | 3.3 STREET | | | | | |
| CITY-ST-ZIP | SI. DAMES OUT PE 33830 | DELETE | 3.4. CITY - 5 4.1 TITLE | 51 - 712 | | | Change | Addition |
| IAME | | Li percit | 4. 2 NAME | | | L.J | Onlange | LJ Madrida |
| STREET ADDRESS | | · · | 4.3 STREET | 22 ignna | | | | |
| CITY-ST-ZIP | | | 4.4 CITY - S | - 1 | | | | |
| TITLE | | ☐ DELETE | 5 1 THUE | | | | Change | Addition |
| NAME | | | 5.2 NAMÉ | | | | | |
| STREET ADDRESS | | j | 5.3 STREET | ADDRESS | | | | |
| CITY-ST-ZIP | | | 5.4 CITY - S | 31 - 7IP | | | | |
| TITLE | | DELETE | G.1 TITEF | | | Ц | Change | Addition |
| NAME | | 1 | 6.2 NAME | | | | | |
| STREET ADDRESS | | 1 | 6.3 STREET | 1 | | | | |
| CITY-ST-ZIP | | | 6.4 CITY - S | 1-7IP | | | | |

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 eath; that I am an efficer or director of the proporation 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 if changed or on an attachment with an address.