

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90365 006 ***158.75

DOCUMENT # F68794

1. Entity Name

THOMAS MARINE CONSTRUCTION, INC.



Principal Place of Business

8999 HIGH COTTON LANE
FT. MYERS FL 33905

Mailing Address

8999 HIGH COTTON LANE
FT. MYERS FL 33905



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/05)

4. FEI Number

59-2163377

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

THOMAS, DEAN C
8999 HIGH COTTON LANE
FT MYERS FL 33905

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00.

After May 1, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DPC ☐ Delete
NAME THOMAS, DEAN C
STREET ADDRESS 8999 HIGH COTTON LN
CITY-ST-ZIP FT MYERS FL

TITLE DP ☒ Change ☐ Addition
NAME Thomas, Dean C.
STREET ADDRESS 8999 High Cotton Lane
CITY-ST-ZIP Fort Myers, FL 33905

TITLE D ☐ Delete
NAME THOMAS, DONNA M.
STREET ADDRESS 1860 MARINA CIRCLE
CITY-ST-ZIP N FORTMYERS FL

TITLE DT ☒ Change ☐ Addition
NAME Thomas, Donna M.
STREET ADDRESS 1860 Marina Circle
CITY-ST-ZIP N Fort Myers, FL 33903

TITLE DST ☐ Delete
NAME CLARK, GAYLE
STREET ADDRESS 17770 RANCHO 78 DR
CITY-ST-ZIP ALVA FL

TITLE DS ☒ Change ☐ Addition
NAME Clark, Gayle
STREET ADDRESS 17770 Rancho 78 Drive
CITY-ST-ZIP Alva, FL 33920

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VP ☐ Change ☒ Addition
NAME Shimp, Kevin C.
STREET ADDRESS 9951 Cypress Lake Drive
CITY-ST-ZIP Fort Myers, FL 33919

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dean C. Thomas

4/13/06

239-337-0008

Date

Daytime Phone #