CR2E034 (9/01)

2002 Uniform Business Report (UBR)

Apr 15, 2002 8:00 am Secretary of State DOCUMENT # F94000002803 1. Entity Name 04-15-2002 90060 016 ***150 00 SAFE BERTH MAINTENANCE, INC. Mailing Address Principal Place of Business ONE HARBOR STREET PO BOX 2253 SAVANNAH GA 31402 SAVANNAH GA 31401 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt, #, etc. Applied For 4. FEI Number City & State City & State 58-2111564 Not Applicable \$8.75 Additional Country Zip Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent SCHULER, ROBERT C Street Address (P.O. Box Number is Not Acceptable) OK -2085-TALLEYRAND-AVENUE venue JACKSONVILLE FL 32206 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. SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. Change ☐ Addition ☐ Delete TITLE TITLE CE0 NAME NAME PEEPLES, FRANK K. STREET ADDRESS STREET ADDRESS ONE HARBOR STREET CITY-ST-ZIP CITY-ST-ZIP SAVANNAH GA 31401 Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME MAYFIELD, E. GAY STREET ADDRESS STREET ADDRESS ONE HARBOR STREET CITY-ST-ZIP CITY-ST-ZIP SAVANNAH GA 31401 ☐ Addition TITLE ☐ Delete TITLE S NAME NAME COX, ANN P STREET ADDRESS STREET ADDRESS ONE HARBOR STREET CITY-ST-ZIP CITY-ST-ZIP SAVANNAH GA 31401 Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME BENTON, JOHN R JR STREET ADDRESS STREET ADDRESS ONE HARBOR STREET CITY-ST-ZIP CITY-ST-7IP SAVANNAH GA 31401 ☐ Delete TITL F Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 13. 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 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 11 or Block 12 if

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME