

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

FILED
Jul 10 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F94000004199 (5)

1. Corporation Name

DETYENS SHIPYARDS, INC.

Principal Place of Business

2383 HIGHWAY 41
MT. PLEASANT SC 29464

Mailing Address

2383 HIGHWAY 41
MT. PLEASANT SC 29464

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/12/1994

4. FEI Number

57-0730948

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

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

600002585856

83

-07/13/98--01004--041

84 City

***400.00

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature (typed or printed name of registered agent and fee, if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE:

12. OFFICERS AND DIRECTORS

TITLE PTD
NAME STEWART, D. LOY
STREET ADDRESS RT. 2, BOX 180
CITY-ST-ZIP MT. PLEASANT SC 29464

☐ DELETE

TITLE V
NAME STOKES, RICHARD C
STREET ADDRESS RT. 2, BOX 180
CITY-ST-ZIP MT. PLEASANT SC 29464

☐ DELETE

TITLE V
NAME BOWERS, ROBERT H
STREET ADDRESS RT. 2, BOX 180
CITY-ST-ZIP MT. PLEASANT SC 29464

☐ DELETE

TITLE V
NAME MOSHER, GERALD L
STREET ADDRESS RT. 2, BOX 180
CITY-ST-ZIP MT. PLEASANT SC 29464

☐ DELETE

TITLE SD
NAME RIVERS, G.L.B. JR
STREET ADDRESS 28 BROAD ST.
CITY-ST-ZIP CHARLESTON SC 29401

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P - President
1.2 NAME
1.3 STREET ADDRESS 2383 Highway 41
1.4 CITY-ST-ZIP

☒ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS 2383 Highway 41
2.4 CITY-ST-ZIP

☒ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS 2383 Highway 41
3.4 CITY-ST-ZIP

☒ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS 2383 Highway 41
4.4 CITY-ST-ZIP

☒ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS 600002585856
5.4 CITY-ST-ZIP -07/13/98--01004--040
***150.00

☐ Change ☐ Addition

6.1 TITLE ST
6.2 NAME Leo A. Fary, Jr.
6.3 STREET ADDRESS 2383 Highway 41
6.4 CITY-ST-ZIP Mt. Pleasant, SC 29464

☐ Change ☒ Addition

14. 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 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.

CR2E034 (10/97)