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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Mar 19 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # F9400006112 (6)

WILMINGTON SHIPPING COMPANY

Principal Plac 330 SHIPYARD WILMINGTON	BLVD.	Mailing Address 330 SHIPYARD BLVD. WILMINGTON NC 28412	:-1837						
						3. Date Incorporated or Qualified 11/30/1994	1	ate of Las /18/199	
<u> </u>	flace of Business	2a. Mailing Address			4, FEI Number				
Suite, Apt.	B ata	26			56-0477767			Not Applicable	
22 Suite, Apr.	#, etc.	Suite. Apt. #, etc.			5. Certificate of Status Desired			5 Additional Required	
City & Stat	0	City & State			6. Election Campaign Financing		\$5.0	00 May Be	
23		28			Trust Fund Contribution				
Zip	Country	Ζφ 				8. This corporation has liability for intangible tax under Florida Statutes		r s. 199.032,	
24	9. Name and Address of Curren	29	30	·1		Florida Statutes 10. Name and Address of New Re			
DAI	MASIO, ANGELA C	t riegistores Agent		81	Name	10. Hallis and Address of Now In	gistoreu	Agein	
	3 NORTHWEST 79TH AVENUE			00		(D.O. D	1 . 3		
	MI FL 33126			82	Street Ac	ddress (P.O. Box Number is Not Acceptal	леј		
				83					
				84	City			85 Z	ip Code
				Щ			FL	<u>- 1 </u>	
office or r	egistered agent, or both, in the State	of Florida, Such change was	s authorize	ed by	the corpo	orporation submits this statement for the praction's board of directors. Thereby acce	ourpose o	it changini pointment	g its registered as registered
agent. La	m familiar with, and accept the obliga-	ations of Section 607.0505, F	Florida Sta	alules					
SIGNATURE	Signature, typed or pented name of registered age	at and the Bapplicable (N	O'C Register	ed Ago	nt squature re	quied when relustating)	DATE		
12.	OFFICERS AND	· · · · · · · · · · · · · · · · · · ·	13.			ADDITIONS/CHANGES TO OFFIC	JERS AN	D DIRECT	ORS IN 12
TITLE	PD	DELF1E 1.8						Chang	ge Addition
NAME	EMERSON, WILLIAM P JR			NAME					
STREET ADDRESS	330 SHIPYARD BLVD. WILMINGTON NC 28412		- 1		ADORESS				
CITY-ST-ZIP TITLE	VSD VSD	DOLLETE	DELFTE 2.1 T		T-ZIP			Chanc	ae Addition
NAME	RUFFIN, PETER B JR			NAME	1			L) O King	je Addition
STREET ADDRESS	330 SHIPYARD BLVD.				ADDRESS				
CITY-ST-ZIP	WILMINGTON NC 28412			2 4 CHY-ST-7IP					
TITLE	V DELETE 3:			TITLE				Chang	ge Addition
NAME	FURR, SUZANNE L		3.21	3 MA Z					
STREET ADDRESS	3333 PIPER LANE		3.3 \$	S1REE I	ADDRESS				
CITY-ST-ZIP	CHARLOTTE NC 28208	DX DELLI		cny-s	I - 7IP				
TITLE	V PARMUADOT OTEVENIA	DELETE		HT:E	Ì			∐ Chang	ge Lj Addition
NAME STREET ADDRESS	EARNHARDT, STEVEN A 38 ROMNEY ST		- 1	NAME	ADDRESS				ļ
CITY-ST-ZIP	CHARLESTON SC 29403			SINCE ONY-S	1				
TITLE	VTD	☐ DELETE		intes.				Chang	ge Addition
NAME	HUTCHENS, ROBERT F		5.27	NAME					
STREET ADDRESS	330 SHIPYARD BLVD.		5.3 9	STREET	ADDRESS				
CITY-ST-ZIP	WILMINGTON NC 28412			ally-S	T- 2IP				7"1"
TITLE	V	□ DELETE		IIILE				☐ Chang	ge Addition
NAME	CRAIG, WILLIAM G			NAME					İ
STREET ADDRESS	I '				ADDRESS				Ī
CITY-ST-ZIP	WILMINGTON NC 28412		640	DIY-S	1-7IP				

14. I do hereby certify that the information supplied with this filing does not quality 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.