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

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PROFIT CORPORATION ANNUAL REPORT

1997

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FLORIDA DEPARTMENT OF STATE

FILED

Apr 30 1997 8:00am

Secretary of State

This corporation has liability for intangible tax under s. 199.032,

10. Name and Address of New Registered Agent

Yes No

Trust Fund Contribution

Florida Statutes

Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be

Added to Fees

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9500003187 (0)

NICEVILLE MARINE SERVICE & SALES, INC.

Country

9. Name and Address of Current Registered Agent

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Principal Place of Business Mailing Address		\$ 10001100 7110 10101 10111 10111 00111 00111 00111 00111 10100 11101 11001 11011 11011		
792 E. JOHN SIMS PKWY NICEVILLE FL 32578	792 E. John Sims PKWY Niceville Fl 32578-2032			
		3. Date Incorporated or Qualified 06/30/1995	3a. Date of Last Report 06/24/1996	
2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied F	
21	26	59-2881351	Not Appli	
Suite Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Addition	
City & State	City & State	6 Floris Control Figure	ΦΕ <u>ΛΛ</u> –	

B1 Name WEINSTOCK, MICHAEL 795 E. JOHN SIMS PKWY 82 Street Address (P.O. Box Number is Not Acceptable) **NICEVILLE FL 32578** 83 City Zip Code

Country

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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			1				
SIGNATURE So return typed or proceed harder of Registered agent and little of applicable (NOTE: Registered Agent signature required when reinstalling) DATE DATE							
12.	OFFICERS AND DIRECTORS	DELETE	13,	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	Addition		
1111.F	•	DECEIE	1.1 TITLE	Li cilange L	ADDITION		
NAME	WEINSTOCK, MICHAEL		1.2 NAME				
STREET ADDRESS	506 GREENWOOD COVE S.		1.3 STREET ADDRESS				
C-TY - ST - 70P	NICEVILLE FL 32578		1.4 CITY - ST - ZIP				
TITLE	-	DELETE	2.1 TITLE	Change	Addition		
NAME	WEINSTOCK, DIANA		2.2 NAME				
STEELT ADORESS	506 GREENWOOD COVE S.		2.3 STREET ADDRESS		Ì		
City+St_2iP	NICEVILLE FL 32578		2.4 CITY+ST-ZIP				
71111		DELETE	3.1 TITLE	Change _	Addition		
NAME			32 NAME		l		
STHEET ADDRESS			33 STREET ADDRESS		1		
OFF-SE-Zet			3.4. CITY-ST-ZIP				
III.		DELETE	4.1 TITLE	☐ Change ☐	Addition		
NAME			4. 2 NAME		j		
STREET ADDRESS			4.3 STREET ADDRESS				
CHY+S1+7(P			4.4 CITY - ST - ZIP		j		
Y][F		DELETE	5.1 TITLE	Change	Addilion		
NAV:		,	5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CHY-SY ZIP			5.4 CITY - \$T - ZIP				
104f		DELETE	6.1 TITLE	Change	Addition		
NAME			6.2 NAME		J		
STREET APPORESS			6.3 STREET ADDRESS				
COLY+ST ZIP			6.4 CITY-SY-ZIP				

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the tulormation 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 off ger 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 of

Jeinotock Date **SIGNATURE**