

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # F95000005799 (0)

1. Corporation Name

OCEAN RESOURCES, INC., OF DELAWARE



Principal Place of Business

350 EIGHTH AVENUE, SE  
ST. PETERSBURG FL 33071

Mailing Address

350 EIGHTH AVENUE, SE  
ST. PETERSBURG FL 33071

3. Date Incorporated or Qualified

11/29/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip Country

29 Zip Country

4. FEI Number

06-1141757

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GASHIV, SAXTON R III  
1465 SAN JUAN CT.  
CLEARWATER FL 34616

81 Name

David G. Mulock

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

1 Progress Plaze, Suite #2300

83

St. Petersburg, FL

84 City

FL

85 Zip Code  
33701

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

*Daniel A. Mortham*  
Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent Signature required when resigning)

5/15/96  
Date

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE CS  
NAME RILEY, RONETTE J  
STREET ADDRESS 1465 SAN JUAN CT.  
CITY-ST-ZIP CLEARWATER FL 34616 ☐ DELETE

1.1 TITLE ☐ Change ☐ Add on  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE P  
NAME CHIN, TOM E  
STREET ADDRESS 1465 SAN JUAN CT.  
CITY-ST-ZIP CLEARWATER FL 34616 ☐ DELETE

2.1 TITLE ☐ Change ☐ Add on  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE V  
NAME DILLARD, PAUL G  
STREET ADDRESS 1465 SAN JUAN CT.  
CITY-ST-ZIP CLEARWATER FL 34616 ☐ DELETE

3.1 TITLE ☐ Change ☐ Add on  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE T  
NAME MORRIS, JASON R  
STREET ADDRESS 1465 SAN JUAN CT.  
CITY-ST-ZIP CLEARWATER FL 34616 ☐ DELETE

4.1 TITLE ☐ Change ☐ Add on  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Add on  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Add on  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

*Ronette J. Riley*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Ronette J. Riley*

May 10, 1996

Date

Daytime Phone

CR2E034 (12/95)