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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT** # F96000005613 (2)

## ANDALE MARINE CORPORATION

321 ROYAL POINCIANA PLAZA

PALM BEACH FL 33480

Principal Place of Business Mailing Address \* HOWARD GUTMAN % HOWARD GUTMAN 4200 GULF SHORE BLVD N. 4200 GULF SHORE BLVD N. DO NOT WRITE IN THIS SPACE NAPLES FL 34103 NAPLES FL 33940 3. Date Incorporated or Qualified 10/29/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable 65-0704622 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Žip Country Ζıρ Country This corporation owes or has paid the current year Intangible 34103 ☐ No 30 Personal Property Tax due June 30. ☐ Yes 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HAYES, WARREN D SR

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.

83 84 City

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

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE TITLE 1.1 TITLE Change Addition 1.2 NAME NAMÉ LUTGERT, RAYMOND L 4200 GULF SHORE BLVD N. STREET ADORESS 1.3 STREET ADDRESS NAPLES FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change ☐ Addition 2.1 TITLE TITLE NAME LUTGERT, SCOTT F 2.2 NAME 4200 GULF SHORE BLVD N. STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP NAPLES FL 2. 4 CITY-ST-ZIP DELETE Change \_\_\_ Addition 3.1 TITLE TITLE NAME CAMPBELL SECRETARIES LTD. 3.2 NAME STREET ADDRESS PO BOX 268 (N/A) 3.3 STREET ADDRESS CITY-ST-ZIP **GRAND CAYMAN, CAYMAN ISLANDS** 3.4. CITY-ST-ZIP DELETE Addition Change TITLE 4.1 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Channe Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change ☐ Addition TITLE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

s not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an appeared to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in ddress. 14. I hereby certify that the information supplied with indicated on this annual report or supplemental officer or director of the corporation or the open Block 12 or Block 13 if changed, or on an appact

85

Zip Code

10/9/

CR2E034

**FILED** 

Mar 26 1998 8:00am

Secretary of State