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

FILED Jan 22 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT #
1. Corporation Name G26242 SHORELINE MARINE CONSTRUCTION COMPANY Principal Place of Business Mailing Address 9906 DETROP ST. P.O. BOX 2157 RIVERVIEW FL 33569 RIVERVIEW FL 33569 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/03/1983 2. Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For 1st Street SW P O Box 945 Not Applicable 21 26 59-2265368 Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State 6. Election Campaign Financing \$5.00 May Be Ruskin, Florida Ruskin, Florida 23 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible 33570 USA 24 33570 Personal Property Tax due June 30. □ No USA 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent WILLIAMS, WILLIAM R. 9806 DETROP ST. Street Address (P.O. Box Number is Not Acceptable) 62 RIVERVIEW FL 33569 83 City 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 rogistered 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 little if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1.1 HTLE NAME WILLIAMS, WILLIAM R 1.2 NAME 9806 DETROP ST. STREET ADDRESS 1.3 STREET ADDRESS RIVERVIEW FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE NAME WILLIAMS, LINDA C. 22 NAME STREET ADDRESS 9806 DETROP ST. 23 STREET ADDRESS CITY-\$T-ZIP RIVERVIEW FL 2.4 CITY - ST - ZIF Change TITLE DELFTE 3.1 TIFLE Addition NAME WILLIAMS, WILLIAM R. JR. 3.2 NAME STREET ADDRESS 9415 PINE RIDGE AVE. 3.3 STREET ADDRESS RIVERVIEW FL 33569 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 THILE ADAMS, KENNETH NAME 4. 2 NAME STREET ADDRESS PO BOX 1052 4.3 STREET ADDRESS QIBSONTON FL 33534 CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS

R2E034

Change

Addition

CITY-ST-ZIP 6.4 CITY - ST - ZIP 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

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

... 0 1

61 TITLE

6.2 NAME

DELETE

STREET ADDRESS CITY - ST - ZIP

STREET ADDRESS

TITLE

NAME