

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

**FILED**  
**Mar 12, 1999 8:00 am**  
**Secretary of State**

03-12-1999 90037 028 \*\*\*300.00



**PROFIT CORPORATION ANNUAL REPORT 1999**

FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

**DOCUMENT # H25664**

1. Corporation Name  
**MARINE FASTENERS, INC.**

Principal Place of Business  
 2920 STONEWALL PLACE  
 SANFORD FL 32773

Mailing Address  
 2920 STONEWALL PLACE  
 SANFORD FL 32773

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**10/15/1984**

4. FEI Number

**59-2447285**

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 owes the current year Intangible Personal Property Tax.  Yes  No

2. Principal Place of Business

21 **120 MARITIME DR.**

2a. Mailing Address

26 **P.O. Box 471318**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 **SANFORD FL**

City & State

28 **LAKE MONROE FL**

Zip

24 **32771**

Country

25 **USA**

Zip

29 **32747**

Country

30 **USA**

9. Name and Address of Current Registered Agent

**BRANTLEY, CARL W., JR.**  
 2920 STONEWALL PLACE  
 SANFORD FL 32773

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

**FL**

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 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	<b>PVS</b>	<input type="checkbox"/> DELETE
NAME	<b>BRANTLEY, CARL W., JR.</b>	
STREET ADDRESS	<b>2468 CHANTILLY TR.</b>	
CITY-ST-ZIP	<b>OVIEDO FL</b>	
TITLE	<b>T</b>	<input type="checkbox"/> DELETE
NAME	<b>BRANTLEY, CARL W., JR.</b>	
STREET ADDRESS	<b>2468 CHANTILLY TR.</b>	
CITY-ST-ZIP	<b>OVIEDO FL</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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, with all other like empowered.

SIGNATURE: *X Carl W. Brantley Jr.*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**CARL W. BRANTLEY JR.**

*1/8/99*

Date

*407-321-2994*

Daytime Phone #

CR2E034 (1/1/98)