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SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 28 PM 4: 14

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # H31757 (8)

1. Corporation Name

EAGLE MARINE, INC.

Principal Place of Business

P.O. BOX 1152
EAGLE RIVER WI 54521

Mailing Address

P.O. BOX 1152
EAGLE RIVER WI 54521

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

11/28/1984

3a. Date of Last Report

08/09/1994

2. Principal Place of Business

21

Suite, Apt., #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt., #, etc.

27

City & State

28

Zip

Country

30

4. FEI Number

59-2466263

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

ELLIS, STEPHEN F
1800 SECOND STREET
SUITE #806
SARASOTA FL 34236

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 of the person in care of the registered agent and the application)

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
P	PANGBURN, JOHN M. III	1176 TYSON ROAD	EAGLE RIVER WI 54521

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 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 Sections 119.07(3)(k), Florida Statutes. I further certify that this information included 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. 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 applicable, or on an attachment with an address.

SIGNATURE:

John M. Pangburn III
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/22/95
Date

715-47-2891
Telephone No.