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 # **H35913** **(3)**

1. Corporation Name
SMITTY'S MARINE TOWING & SALVAGE, INC.

Principal Place of Business
11331 LUANNE LANE
FT MYERS FL 33908

Mailing Address
11331 LUANNE LANE
FT MYERS FL 33908

3. Date Incorporated or Qualified: **12/28/1984**
3a. Date of Last Report: **04/27/1995**

4. FEI Number: **59-2481388** [ ] 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

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

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

9. Name and Address of Current Registered Agent
SMITH, THURMAN
11331 LUANNE LANE
FT MYERS FL 33908

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 DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
P	SMITH, THURMAN	11331 LUANNE LANE	FT MYERS, FL 33908	[ ]
V	SMITH, THURMAN, JR.	11331 LUANNE LANE	FT MYERS, FL 33908	[ ]
				[ ]
				[ ]
				[ ]
				[ ]

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
1	2	3	4	[ ]	[ ]
5	6	7	8	[ ]	[ ]
9	10	11	12	[ ]	[ ]
13	14	15	16	[ ]	[ ]
17	18	19	20	[ ]	[ ]
21	22	23	24	[ ]	[ ]

14. I do hereby certify that the information supplied with this report is voluntarily furnished and is not required 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 is entered in Block 11 with an address.

SIGNATURE: 03/3/96 785 1444
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone #

CR2E034 (12/95)