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

Mailing Address

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # J07881 1. Corporation Name

Principal Place of Business

CITY-ST-ZIP

C. HUNTRESS MARINE, INC.

1600 N. US † STE A FT. PIERCE FL 34946 US		PO BOX 4476 P. O. BOX 4476 FT. PIERCE FL 34948 US			DO NOT WRITE IN T	HIS SPACE	
					3. Date Incorporated or Qualifed 04/07/1986		
9 material DI	ass of Business	2a. Mailing Address			4. FEI Number	Api	olied For
					59-2650673	<del> </del>	Applicable
21	Suite, Apt. #, etc.	a Ant # etc		39 2030073	\$8.75 A	<del></del>	
Suite, Apt. :	#, etc.	27 Stille, Apr. #, etc.	Suite, Apr. #, etc.		5. Certificate of Status Desired	Fee Re	l I
City & State City & State				· ··-	6. Election Campaign Financing	\$5.00	
23	28			Trust Fund Contribution	Added to	rees .	
Zip					8. This corporation owes the current year		
24	29 30			Personal Property Tax. Yes No			
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
	4 (4 )	•	81	Name			
WELLS, RAYMOND K., III			82	82 Street Address (P.O. Box Number is Not Acceptable)			
	20TH AVENUE				The state of the second section of the second section is	orn sign area satisfic	181 2411 (171
VERO BEACH FL 32960			83				
			84	City	च्या १ वे विशेष द्वारा क्षारा १ विशेष के स्थाप है। विशेष के स्थाप है । विशेष के स्थाप है । विशेष के स्थाप है । स्थाप के स्थाप के स्	FL 85 Zip C	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 of 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							<u>·</u>
SIGNATORE	Signature, typed or printed name of registered age			nt signature requir	red when reinstating) (1 CT 2 DAT		DC IN 12
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICER:		
TITLE	P	☐ DELETE	1.1 TITLE			Change	☐ Addition
NAME	WELLS, RAYMOND K III		1.2 NAME				•
STREET ADDRESS	920 20TH AVE		1.3 STREE	TADDRESS	•		
CITY-ST-ZIP	VERO BEACH FL		1.4 CITY-S	ST-ZIP		^ .	
TITLE	VP	☐ DELETE	2.1 TITLE			Change	. Addition
NAME	WELLS, KAREN RITA		2.2 NAME			*	
STREET ADDRESS	920 20TH AVE		2.3 STREE	T ADDRESS			.
	VERO BEACH FL		2. 4 CITY-				
CITY-ST-ZIP		DELETE	3.1 TITLE	31-21		☐ Change	Addition
TITLE 1/2/C	S CAREBAR OF A		3.2 NAME		•		,
NAME	BATTES, CLARIE STETTA			T ADDRESS			
STREET ADDRESS	1826 9TH PLACE						和 [1]
CITY-ST-ZIP	VERO BEACH FL	☐ DELETE	3.4. CITY-	51-ZIP	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	70°, C [ Change:	Addition
TITLE			4.1 TITLE		A STATE OF THE STA		_
NAME	LATTANZI, DENNIS		4. 2 NAME	1			.
STREET ADDRESS	P.O. BOX 4476			TADORESS		•	
CITY-ST-ZIP	FORT PIERCE FL		4.4 CITY-S	ST-ZIP		Change	☐ Addition
TITLE		☐ DELETE	5.1 TITLE		1	L'1 Cuange	- Addition
NAME			5.2 NAME				
STREET ADDRESS				T ADDRESS	e grander a		
CITY-ST-ZIP	*		5.4 CITY-5	ST-ZIP			
TITLE	(20 L) (1 )	☐ DELETE	6.1 TITLE		÷	Change	☐ Addition
NAME	- 유럽 기타 (15 miles) - 1 miles		6.2 NAME				,
STREET ADDRESS	the state of		6.3 STREE	T ADDRESS	•	•	
CITY-ST-ZIP	1.4		6.4 CITY-5	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 faceiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in address, with all other like empowered

**SIGNATURI** 

**FILED** 

Feb 11, 1999 8:00am

**Secretary of State** 

02-11-1999 90034 038 \*\*\*150.00