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

**PROFIT** CORPORATION 3 1 ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 29 1997 8:00am

Secretary of State

904-477-8011

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J19681

(2)

| BYFIELD   | MARINE SUPPLY, INC.  |   |                                   |                 |  |                        |   |                   |
|---|--|---|-----------------------------------|-----------------|--|------------------------|---|-------------------|
| Principal Place of Business<br>175 OLIVE ROAD<br>PENSACOLA FL 32514 |  | Mailing Address<br>175 OLIVE ROAD<br>PENSACOLA FL 32514-4     | _                                 |                 |  | IN E SISII OTOIL OLDII | 1 <b>(18</b> 11 <b>(110</b> 11 <b>0</b> | <b>118)1 1881</b> |
|   |  |   |                                   |                 | 3. Date Incorporated or Qualifie 06/17/1986  | I                      | of Last Re<br>5/1996                    | eport             |
| 2. Principal P  | Jace of Business   | 2a. Mailing Address   |                                   |                 | 4. FEI Number  | 1 00/10                |   | plied For         |
| 21  |  | 26  | - <b>-</b> 1                      |                 | 59-2692173   | Not Applicable         |   |                   |
| Suite, Apt. #, etc. Suite, Apt. #,                                  |  |   | -                                 |                 |  |                        | \$8.75                                  |                   |
| 22  |  |   |                                   |                 | 5. Certificate of Status Desired Fee Required  |                        |   |                   |
| City & State City & State   |  |   |                                   |                 | 6. Election Campaign Financing   |                        | \$5.00                                  | May Be            |
| 23 28   |  |   |                                   |                 | Trust Fund Contribution  |                        | Added t                                 |                   |
|   | Country  | Zip   | Country                           | y               | 8. This corporation has liability f  |                        |   | 199.032,          |
| 24  | 25     29  <br>9. Name and Address of Current Registered Agent   |   | 30                                |                 | Florida Statutes Yes No  10, Name and Address of New Registered Agent                                    |                        |   |                   |
| I EW  |  | iii negistered Agent  | 81                                | Name            | IV. Halle and Address Of Rew   | ueāleraien vi          | 70111                                   |                   |
|   | is, stephen R.<br>S.W. 32ND street   |   |                                   |                 |  |                        |   |                   |
|   | LAUDERDALE FL  |   | 82                                | Street Addr     | ess (P.O. Box Number is Not Accep  | (able)                 |   |                   |
| [ 1. ]  | ENOUGHDALL I L   |   | 83                                |                 |  | Martine                |   | ····              |
|   |  |   |                                   |                 |  |                        | 1221 -                                  |                   |
|   |  |   | 84                                | City            |  | FL                     | 85 Zip (                                | Code              |
| office or r<br>agent ± a<br>SIGNATURE                               | egistered agent for both, in the State<br>in familiar with, and accept the oblig<br>Styrium, typics or printed name of registers (4.3) | e of Florida. Such change wa<br>gations of, Section 607.0505. | s authorized b<br>Florida Statute | y the corporati | oration submits this statement for the<br>ion's board of directors. I hereby acc<br>ed when reinstating) | DATE                   | ntment as                               | registered        |
| 12.   | <u> </u>   | ND DIRECTORS  | 13.                               |                 | ADDITIONS/CHANGES TO OF  |                        |   |                   |
| TITLE   | D  | ☐ DELETE  | 1.1 TITLE                         | İ               |  | L                      | Change                                  | Addition          |
| NAME  | LEWIS, JAMES R., JR.   |   | 1.2 NAME                          |                 |  |                        |   |                   |
| STREET ACURESS  | ET LAUDEODALE EL   |   | 1.3 STREET ADDRESS                |                 |  |                        |   |                   |
| C/TY+S*+7IP   | DV DELETE  |   | 1.4 CITY -<br>2.1 TITLE           | ST-ZIP          |  | ·                      | Change                                  | Addition          |
| TITLE   | LEWIS, STEPHEN R.  |   | 2.1 III.E<br>2.2 NAME             |                 |  | _                      | T Origingo                              | Addition          |
| NAME<br>CONTER ADDOCS A   | AND A MI ANNID AT  |   |                                   | T ADDRESS       |  |                        |   |                   |
| STREET ADDRESS  <br>City+St+Zip                                     | FT. LAUDERDALE FL  |   | 2 4 CITY-                         |                 |  |                        |   |                   |
| THUE  | PD   | DELETE  | 31 TITLE                          | - U1- EII       | , , , , , , , , , , , , , , , , , , ,  |                        | Change                                  | Addition          |
| NAME  | BYFIELD, FREDERIC W., JR   |   | 3.2 NAME                          |                 |  | _                      |   |                   |
| STREET ADDRESS  | 175 OLIVE ROAD   |   | 33 STREE                          | T ADDRESS       |  |                        |   |                   |
| C(TY - \$1 - 7)P  | PENSACOLA FL   |   | 3 4. CITY-                        | ST-ZIP          |  |                        |   |                   |
| TIFLE   |  | DELETE  | 4 1 TITLE                         |                 |  |                        | Change                                  | Addition .        |
| NAME  |  |   | 4. 2 NAME                         |                 |  |                        |   |                   |
| STREET ADORESS  |  |   | 4.3 STREE                         | T ADDRESS       |  |                        |   |                   |
| CITY - \$1 - 7/P  |  | <b></b>   | 4.4 CITY -                        | ST-ZIP          |  |                        |   |                   |
| TITLE   |  | ☐ DELETE  | 5.1 TITLE                         |                 |  | Ĺ                      | Change                                  | Addition          |
| NAME  |  |   | 5.2 NAME                          |                 |  |                        |   |                   |
| STREET ADDRESS  |  |   |                                   | T ADDRESS       |  |                        |   |                   |
| CITY-ST-ZF  |  | ☐ DELETE  | 5.4 CITY -                        | ST-ZIP          |  |                        | Change                                  | Addition          |
| TITLE   |  | FT NTICLE   | 61 TITLE                          |                 |  | L                      | - Augusta                               | - Addition        |
| NAME<br>executivesiones   |  |   | 6.2 NAME                          |                 |  |                        |   |                   |
| STREET ADDRESS  |  |   | 6.3 STREE                         | T ADDRESS       |  |                        |   |                   |

14. I do 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.