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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

ENFIELDAMARINE SLIPPLYXING

LEWIS MARINE SUPPLY OF PENSACOLA, INC.

NC 2-19-9

**FILED** Mar 05 1998 8:00am Secretary of State

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Principal Place of Business Mailing Address						
175 OLIVE ROAD 175 OLIVE ROAD						
PENSACOLA FL \$2514 PENSACOLA FL 32514						
				DO NOT WRITE IN THIS	S SPACE	
				3. Date Incorporated or Qualified		
O Director Diseased During	1 m - 11 22 - 11			06/17/1986		
2. Principal Place of Business	2a. Mailing Address			4. FEI Number	Applied For	
21 Suite, Apt. #, etc.	26			59-2692173	Not Applicable	
	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional	
City & State	City & State	-			Fee Required	
23	28			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be	
Zip Country	Zip	Country			Added to Fees	
24 25	<del>├</del>	30		<ol> <li>This corporation owes or has paid the c Personal Property Tax due June 30.</li> </ol>	urrent year Intangible	
9. Name and Address of Current		50 I		10. Name and Address of New Registered		
LEWIS, STEPHEN R. 81 Name						
220 S.W. 32ND STREET		<u></u>				
FT. LAUDERDALE FL		82	Street Addre	ss (P.O. Box Number is Not Acceptable)		
11. DIVUENUALL ! L		83				
		84 (	City		85 Zip Code	
44 Durawat to the annihing of Captions (CZ 07.07.07.07.07.07.07.07.07.07.07.07.07.0				FI	<u> </u>	
<ol> <li>Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligate</li> </ol>	and 607, 1508, Florida Statutes I Florida. Such change was au	s, the above-n thorized by th	namea corpo ne corporatio	ration submits this statement for the purpose in's board of directors. I hereby accept the ap	of changing its registered pointment as registered	
agent. I am familiar with, and accept the obligat	ons of, Section 607.0505, Flori	da Statutes.	,			
SIGNATURE						
Signature, typed or printed name of registional agent  12. OFFICERS AND		Registered Agent a	signature required	4,	ID DIDECTORS IN 10	
TITLE D	DELETE	1.1 TITLE	DC	ADDITIONS/CHANGES TO OFFICERS AN	Change Addition	
NAME LEWIS, JAMES R., JR.	- December				A Change L Addition	
AAA C W AAND OT		1.2 NAME		WIS, JAMES R., JR.		
ET LAUDEODALE EL		1.3 STREET AD		O S W 32ND STREET		
THILE DV	☐ DELETE	1.4 CITY - ST - Z		. LAUDERDALE, FL.	4-1 ot 1 1 4 4 mg.	
LEMMO ATERVIEND	CT DETEIR	2.1 TITLE	DP		Change Addition	
AND OUL ADMID OF		2.2 NAME		WIS, STEPHEN R.		
ET LAUDEDDALE EL		2.3 STREET ADI		OSW 32ND STREET		
TOTAL	V DC: FTF	2. 4 DITY-ST-2		. LAUDERDALE, FL.		
	K DELETE	3.1 TITLE	DT		Change K Addition	
NAME BYFIELD, FREDERIC W., JR		3.2 NAME		LEMAN, CAROLYN		
STREET ADDRESS 175 OLIVE ROAD		3.3 STREET ADE		OSW 32ND STREET		
CITY-ST-ZIP PENSACOLA FL		3.4. CITY-ST-2		. LAUDERDALE, FL.		
TITLE	☐ DELETE	4.1 TITLE	S		Change 🛣 Addition	
NAME		4. 2 NAME		AM, SANDRA L.		
STREET ADORESS		4.3 STREET ADD	DRESS 220	OS W 32ND STREET		
CITY-ST-ZIP		4.4 CITY-ST-Z	P FT.	. LAUDERDALE, FL.		
TITLE	☐ DELETE	5.1 TITLE			☐ Change ☐ Addition	
NAME		5.2 NAME		- 5 <u>0,00024488</u>	US I	
STREET ADDRESS		5.3 STREET ADD	DRESS	-03/06/98010090	104	
CITY-ST-ZIP		5.4 CITY-ST-ZI	IP	***150.00		
TITLE	DELETE	6.1 TITLE			☐ Change ☐ Addition	
NAME		6.2 NAME			フィC	
STREET ADDRESS		6.3 STREET ADD	ORESS		2''>	
CITY-ST-ZIP		6.4 CITY-ST-ZI	i		~ LL	

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 trusted 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.