

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUL 24 AM 8:40

DOCUMENT # K33914 (8)
1. Corporation Name
AQUAMAR PRODUCTION RESEARCH CORPORATION

Principal Place of Business Mailing Address
1803 WEAKFISH WAY 1803 WEAKFISH WAY
P O BOX 27099 P O BOX 27099
PANAMA CITY FL 32411 PANAMA CITY FL 32408
US US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 09/20/1988		3a. Date of Last Report 04/21/1994	
4. FEI Number 59-2920230		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			

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent

SIPPLE, HARRY B. III
1803 WEAKFISH WAY
PANAMA CITY FL 32411

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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 typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	☐ Change ☐ Addition
NAME	SIPPLE, HARRY B. III	12 NAME	
STREET ADDRESS	1803 WEAKFISH WAY	13 STREET ADDRESS	
CITY - ST - ZIP	PANAMA CITY FL	14 CITY - ST - ZIP	
TITLE	D	21 TITLE	☐ Change ☐ Addition
NAME	GREEN, H.M.	22 NAME	
STREET ADDRESS	1808 WEAKFISH WAY	23 STREET ADDRESS	
CITY - ST - ZIP	PANAMA CITY BCH. FL	24 CITY - ST - ZIP	
TITLE	D	31 TITLE	☐ Change ☐ Addition
NAME	BURNHAM, WESLEY L. JR	32 NAME	
STREET ADDRESS	1805 WEAKFISH WAY	33 STREET ADDRESS	
CITY - ST - ZIP	PANAMA CITY BCH. FL	34 CITY - ST - ZIP	
TITLE	D	41 TITLE	☐ Change ☐ Addition
NAME	WOOD, FERRELL	42 NAME	
STREET ADDRESS	100 DELWOOD BEACH RD.	43 STREET ADDRESS	
CITY - ST - ZIP	PANAMA CITY BCH. FL	44 CITY - ST - ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY - ST - ZIP		54 CITY - ST - ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY - ST - ZIP		64 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 Section 110.07(3)(k), 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.

SIGNATURE: Harry B. Sipple, III HARRY B. Sipple, III 7/11/95 904-234-3225
Signature typed or printed name of signing officer or director Date