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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Jul 30 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K33914

(8)

AQUAMAR PRODUCTION RESEARCH CORPORATION

·			n					
Principal Plac	e of Business	Mailing Address	Mailing Address		I TO DECENTE AND ELEMENT STATE ENGLISH STREET STREET	- AHON BLOW BLON \$101	II MEDER MINIT OR DE	
1803 WEAKFISH WAY P O BOX 27089 PANAMA CITY FL \$2411 US		1803 WEAKFISH WAY P O BOX 27099 PANAMA CITY FL 32408 US	P O BOX 27099 PANAMA CITY FL 32408-7235		Date Incorporated or Qualified	Lea Data of L	ant Daniel	
		00	••		3. Date Incorporated or Qualified			
2. Principal P	lace of Business	2a, Mailing Address	2a. Mailing Address		4. FEI Number		Applied For	
21		26		59-2920230		Not Applicable		
Suite, Apt. #, etc. 22 P. O · Box 27047		Suite, Apt. #, etc. 27 P. D. Bo	27 P.O. Box 27067		5. Certificate of Status Desired	1 1 7	\$8.75 Additional Fee Required	
City & Stat	e	City & State			Election Campaign Financing Trust Fund Contribution		.00 May Be ded to Fees	
Zip			Cou	ntry	8. This corporation has liability for i			
24	25	29	30		Florida Statutes	Yes No		
	9. Name and Address of Curr	ent Registered Agent			10. Name and Address of New Re	jistered Agent		
SIPPLE, HARRY B. III				81 Name				
1803 WEAKFISH WAY PANAMA CITY FL 32411				82 Street Add	lress (P.O. Box Number is Not Acceptab	le)		
				83		·		
			Ī	84 City		FL 85	Zip Code	
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508. Florida Statu	ites the ab	ove-named cor	poration submits this statement for the p	urnose of changi	ing ite registered	
office or r	egistered agent, or both, in the Sta	te of Florida. Such change was	authorized	by the corpora	tion's board of directors. I hereby accep	t the appointmen	it as registered	
	m tannial will, and accopt the obi	igations of, Section 607.0005, F	ionua statt	nes.				
SIGNATURE	Signature, typed or printed name of registered	agent and title il applicable. (NO	TE: Registered	Agent signature requ	ired when reinstating)	DATE		
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIREC	TORS IN 12	
TITLE	D	☐ DELETE	1.1 1(1	L€		☐ Chai	nge 🔲 Addition	
NAME	SIPPLE, HARRY B., NI		1.2 NA	VIE .				
STREET ADDRESS	1803 WEAKFISH WAY		1.3 STF	REET ADDRESS				
CITY-ST-ZIP	PANAMA CITY FL	·	1.4 CIT	Y-ST-ZIP				
TITLE	D	☐ DELETE	2.1 TIT	.E		☐ Char	nge 🔲 Addition	
NAME	GREEN, H.M.		2.2 NA	ME				
STREET ADDRESS	1808 WEAKFISH WAY		2.3 STF	REET ADDRESS				
CITY-ST-ZIP	PANAMA CITY BCH. FL			Y-ST-ZIP				
TITLE	D	☐ DELETE	3.1 1(1)	.ŧ		☐ Char	nge 🔲 Addilion	
NAME	BURNHAM, WESLEY L., JR		3.2 NA	···				
STREET ADDRESS	1805 WEAKFISH WAY		I.	EET ADDRESS				
CITY-ST-ZIP	PANAMA CITY BCH. FL	DELETE		Y-ST-ZIP				
TITLE	D WAAD EEDDELL	DECEIE	4.1 TiTi			∟ Char	nge 🔲 Addition	
NAME	WOOD, FERRELL		4. 2 NA	i				
STREET ADDRESS	100 DELWOOD BEACH RD.			EET ADDRESS				
CITY-ST-ZIP TITLE	PANAMA CITY BCH. FL	DELETE		Y-ST-ZIP	·	TT ac.		
NAME			5.1 TIT			☐ Chan	nge L_ Addition	
			5.2 NA					
STREET ADDRESS		•		EET ADDRESS				
CITY-ST-ZIP TITLE		DELETE		r-ST-ZIP			an Addition	
		☐ DECE!	6.1 TITL			Chan	nge L_Addition	
NAME			6.2 NA					
STREET ADDRESS				EE1 ADDRESS				
CITY-ST-ZIP			■ 6.4 C(T)	r-S1-ZIP				

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.