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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DE PARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K71961

(2)

HOUSER MARINE INDUSTRIES, INC.

## FILED Feb 27 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address	Mailing Address			I TRAYDIII DEI SOOOT HAND AND DITAY DADIL DIDIL BIDIL BIDIL DIDIL DIDIL DIDIL DIDIL
•		· ·	1180 SOUTH PATRICK DRIVE			
1180 SOUTH PATRICK DRIVE SATELLITE BEACH FL 32937		SATELLITE BEACH FL 32997				DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
						03/09/1989
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number Applied For
21		26				59-2942924 Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.				\$8.75 Additional
22		27				Fee Required
City & State		City & State				6. Election Campaign Financing \$5.00 May Be
23	Country	7 <sub>(F)</sub>	Count			Trust Fund Contribution Added to Fees
Zip	Country 25	29	30	uniny		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
24	g, Name and Address of Curre		1301	T		10. Name and Address of New Registered Agent
HOUSER, DANIEL R. 904 KING'S POST ROAD				81	Name	
				82	Stroot (	Address (P.O. Box Number is Not Acceptable)
ROCKLEDGE FL FL 32955				02	SHEELF	Address (F.O. Box Number is Not Acceptable)
1.0	ONEED OF LE LE OFFICE			83		
				84	City	85 Zip Code
					•	FL   T   T
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.						
agent. I a	im familiar with, and accept the oblig	ations of Section 607.0505	Florida Sta	itules	, по согр Б.	colling a board of directions. Thereby accept the appointment as regions as
SIGNATURE Standards based or profesting out to stand about and title of applicable. (NOTE Registered Agent signature required when reinstating)  DATE						
12.	Signature, typed or printed name of registered as	Pert and title if applicable (	NOTE Hegister		nt signature	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1.1		Т	Change Addition
NAME	HOUSER, LYLE			NAME		_ •
STREET ADDRESS	5825 SOUTH US #1		1.3 S		ADDRESS	·
CITY-ST-ZIP	ROCKLEDGE FL		1.40	CITY-S	T-ZIP	
TITLE	V	DELETE	2.1 1	TILE		☐ Change ☐ Addition
NAME	HOUSER, THOMAS G		2.21	NAME		
STREET ADDRESS	1780 CADDICOC CIR		2.3 5	STREET	ADDRESS	
CITY+ST-ZIP	MELBOURNE FL			CITY-S	T-ZIP	
TITLE	•		TITLE		Secretary / Leavure Change Maddition	
NAME	HOUSER, DANIEL R			MAME		HOUSE POST Rel
STREET ADDRESS	904 KINGS POST ROAD				address	Secretary Measure Change Maddition  House Daniel R.  Goy Kings Post Lel  Pocklouge, Fl. 33655
CITY-ST-ZIP	ROCKLEDGE FL	DELETE		CITY-S	ST-ZIP	Change Addition
MAME NAME	HOUSER, THOMAS G	€7 nectite		NAME		
STREET ADDRESS	1780 CADILLAC CIR				ADDRESS	
CATY+ST-ZIP	MELBOURNE FL 32935			CITY-S	i	
TITLE	STD	DELETE		TITLE		Director Dinage Addition
NAME	HOUSER, TIMOTHY L	_		NAME		Director Block Addition Houser, Timothy 2: 1100 John Rhodes Block #120 Mel Bourse, F1. 329 35
STREET ADDRESS	1100 JOHN RHODES BLVD	#120			ADDRESS	1100 John Rhodes Block #100
CITY-ST-ZIP	MELBOURNE FL			CITY-S		Mel bourse, F1. 329 35
TITLE		DELETE	6.1			Change Addition
NAME			6.21	NAME		
STREET ADDRESS			6.3	STREET	ADDRESS	
CITY - ST - ZIP			6.4 (	CITY-S	T-ZIP	
14 I hereby	cortify that the information supplied	with this bling does not quali	fy for the ex	emn	tion state	d in Section 119.07(3)(i). Florida Statutes, I further certify that the information

4. Thereby certify that the information supplied with this thing 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 suppliencental 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 corrivation of the correction of the cor

SIGNATURE.

Provide P. House R.

2/17/98 407-778-840

HZEC34 (103)