PROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARI Sandra B Secretary	FTER MAY 1 IS \$ 5.00 FLORIDA DEPARTMENT F STATE Sandra B Mort in Secretary of S DIVISION OF CORPC PHONS		
DOCUM		03 (4)			
1. Corporation I		• •	ı		
SEAGU	LL MARINE SERVICES, II	NG.			
14.0.		5131 N. PALAFOX ST. PENSACOLA FL 32506			
		00	1	 Date Incorporated or Qualified 03/24/1989 	3a. Date of Last Report 01/23/1995
2. Principal Plac	e of Business	2a. Mailing Address		4. FEI Number	Applied For
21	****	26		65-0121436	Not Applicable
Suite, Apt. #,	etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	28 Zip	Country	B. This corporation has liability for	intangible tax under s. 199.032,
24	25	+_i	30	Florida Statutes Yes 10. Name and Address of New F	No Registered Agent
	9. Name and Address of Curre	in negistered Agent	81 Name	10. Name and Address of New .	iogistorou zigott
	UFF, MARVIN L.		82 Street Add	ress (P.O. Box Number is Not Acceptate	ole)
	PALAFOX ST.		83		
PENSAU	OLA FL FL 32505		84 City		85 Zip Code
				and a separate service of the servic	FL ` `
or registere	ithe provisions of Sections 607.050 diagent, or both, in the State of Flo i, and accept the obligations of, Sec	rida. Such change was authorized	, the above named corp: I by the corporation's boo	oration submits this statement for the purant of directors. I hereby accept the app	rpose of changing its registered office pointment as registered agent. I am
SIGNATURE s	ignature, typed or printed han a of registered ago	ctars de l'arpe ate (NOTE	Fedisterad Agent signature requi		CA ^r t
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	FICERS AND DIRECTORS IN 12 Change Addition
TITLE	P Woodruff, Marvin L	☐ DELETE	1 1 TO LE 1.2 NAME		Cuards C vocuou
NAME STREET ADDRESS	5131 N. PALAFOX ST.		1.3 STREET ADORESS		
CITY-ST-ZIP	PENSACOLA FL 32505		1.4 CITY - ST - ZIP		
THILE	VP	DELETE	2 1 THTLE		☐ Change ☐ Addition
NAME	WOODRUFF, LYNN C.		2.2 NAME		
STREET ADDRESS	5131 N. PALAFOX ST.		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	PENSACOLA FL 32505 S	DELETE	2 4 CITY - ST - ZIP 3 1 T TLE		Change Addition
NAME	RON D. STROBO,		3.2 NAME		<u>-</u>
STREET ADDRESS	2101 TUCSON AVENUE		3.3 STREET ADDRESS		
CITY - ST - ZIP	PENSACOLA FL 32526		3 4 CITY - S1 - ZIP		Channe Addition
TITLE		☐ DELETE	4 1 11TLF : 4 2 NAME		☐ Change ☐ Addition
NAME STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4 # TY SI 200		
TITLE		☐ DELETE	5 tif		Change Addition
NAME			5 / I - IMF		
STREET ADDRESS			5 1 TELLI ADDRESS		
CITY - ST - ZIP TITLE		☐ DELETE	6 TEE		☐ Change ☐ Addition
NAME		-	6.2 h 1ME		· —

STREET ADDRESS

14. I do hereby certify that the information supplied with this filing is voluntarily furnished as certify that the information indicated on this annual report or suppliemental annual report of the that I am an officer or director of the corporation or the receiver or trustee empor appears in Block 12 or Block 13 if orthinged, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR OR DIRECTOR OF D

parvin L. Woodruff 4-19-96

IREET ADDRESS

Tr - Si - Z.P

does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes, I further is true and accurate and that my signature shall have the same legal effect as if made under ed to execute this report as required by Chapter 607, Florida Statutes; and that my name

CR2E034 (12/95)