

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

FILED

May 01 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # K76203
1. Corporation Name
SEAGULL MARINE SERVICES, INC.

(4)



Principal Place of Business
10121 SINTON DRIVE
PENSACOLA FL 32507

Mailing Address
5131 N. PALAFOX ST.
PENSACOLA FL 32505
US

DO NOT WRITE IN THIS SPACE

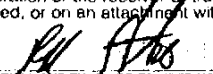
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/24/1989	
21		26		4. FEI Number 65-0121436	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
22		27		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
City & State		City & State		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	
23		28			
Zip		Zip			
24		29			
Country		Country			
25		30			
9. Name and Address of Current Registered Agent WOODRUFF, MARVIN L. 5131 N. PALAFOX ST. PENSACOLA FL FL 32505				10. Name and Address of New Registered Agent	
				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City	
				FL 85 Zip Code	

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 reinstating)		DATE	
12. OFFICERS AND DIRECTORS					
TITLE	P	WOODRUFF, MARVIN L.		☐ DELETE	
NAME		5131 N. PALAFOX ST.			
STREET ADDRESS		PENSACOLA FL 32505			
CITY-ST-ZIP					
TITLE	VP	WOODRUFF, LYNN C.		☐ DELETE	
NAME		5131 N. PALAFOX ST.			
STREET ADDRESS		PENSACOLA FL 32505			
CITY-ST-ZIP					
TITLE	S	RON D. STROBO,		☐ DELETE	
NAME		2101 TUCSON AVENUE			
STREET ADDRESS		PENSACOLA FL 32526			
CITY-ST-ZIP					
TITLE				☐ DELETE	
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE				☐ DELETE	
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE				☐ DELETE	
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
1.1 TITLE				☐ Change ☐ Addition	
1.2 NAME					
1.3 STREET ADDRESS					
1.4 CITY-ST-ZIP					
2.1 TITLE				☐ Change ☐ Addition	
2.2 NAME					
2.3 STREET ADDRESS					
2.4 CITY-ST-ZIP					
3.1 TITLE				☐ Change ☐ Addition	
3.2 NAME					
3.3 STREET ADDRESS					
3.4 CITY-ST-ZIP					
4.1 TITLE				☐ Change ☐ Addition	
4.2 NAME					
4.3 STREET ADDRESS					
4.4 CITY-ST-ZIP					
5.1 TITLE				☐ Change ☐ Addition	
5.2 NAME					
5.3 STREET ADDRESS					
5.4 CITY-ST-ZIP					
6.1 TITLE				☐ Change ☐ Addition	
6.2 NAME					
6.3 STREET ADDRESS					
6.4 CITY-ST-ZIP					

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 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:


SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RON D. STROBO

4-14-98

Date

850434 8880

Daytime Phone # 0512082

CR2E034 (10/97)