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PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



Virginia M. Hill
SIGNATURE AND TYPED OR PRINTED NAME OF

FLORIDA DEPARTMENT OF STATE

FILED

Jan 30 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K77167

(0)

Mailing Address

HILL MARINE SUPPLY, INC.

C/O HERBERT E. HILL C/O HERBERT E. HILL 2003 THRACE STREET 2003 THRACE STREET TAMPA FL 33805 TAMPA FL 33605-6353 3a. Date of Last Report 3. Date Incorporated or Qualified 04/03/1989 04/01/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-2941606 Not Applicable 26 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees 23 28 Trust Fund Contribution Country Zip Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HILL, HERBERT E. 2003 THRACE STREET 82 Street Address (P.O. Box Number is Not Acceptable) TAMPA FL 33605 83 84 City Zip Code 85 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, typicd or printed name of registered agent and tice if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PTD DELETE Change Addition 1.1 TITLE TITLE HILL, HERBERT E. 1.2 NAME 7304 N. HOWARD STREET 1.3 STREET ADDRESS STREET ADDRESS TAMPA FL CITY-ST-ZIP 1.4 CITY - ST- ZIP DELETE ASORIO VSD ☐ Change 2.1 TITLE TITLE HILL, VIRGINIA M. 2.2 NAME NAME 7304 N. HOWARD STREET STREET ADDRESS 2.3 STREET ADDRESS TAMPA FL CITY-SI-7P 2.4 CITY-ST-ZIP DELETE 3.1 TITLE ☐ Change Addition TITLE NAME 32 NAME 3.3 STREET ADDRESS STREET ADDRESS 3 4. CITY - ST - ZIP CITY-\$T-ZIP DELETE Change Addition THLE 41 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4 4 City - ST-ZIP CITY-ST-ZIP DELETE Channe Addition TITLE 51 TITLE 52 NAME NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change ... Addition 61 TITLE TITLE 62 NAME NAME **6.3 STREET ADDRESS** STREET ADDRESS 64 CITY-ST-ZIP CITY - ST - ZIP 14. I do hereby cerl fy 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.

CHION DIRECTOR M. Will