# FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 25 PM 4:01

DOCUMENT # K82269 (7)

1. Corporation Name
BLUE WATER ENGINEERING & DESIGN, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| ~~171 HOOD AVE.~~<br>~~SUITE 21~~<br>TAVERNIER FL 33070<br>US | P. O. BOX 819<br>TAVERNIER FL 33070<br>US |

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/21/1989
3a. Date of Last Report: 03/08/1994

2. Principal Place of Business
21: 91971 OVERSEAS Hwy
22: Suite, Apt. #, etc.
23: City & State
24: Zip
25: Country

2a. Mailing Address
26:
27: Suite, Apt. #, etc.
28: City & State
29: Zip
30: Country

4. FEI Number: 65-0128301 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

GRIERSON, MARILYN
171 HOOD AVE. SUITE 21
P.O. BOX 109
TAVERNIER FL 33070

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 91971 OVERSEAS Hwy
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: Marilyn J. Grierson MARILYN J GRIERSON 1/24/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|---|---|---|---|
| TITLE | DP | 1.1 TITLE | ☑ Change ☐ Addition |
| NAME | GRIERSON, WAYNE | 1.2 NAME | |
| STREET ADDRESS | 171 HOOD AVE., #21 | 1.3 STREET ADDRESS | 91971 OVERSEAS Hwy |
| CITY-ST-ZIP | TAVERNIER FL | 1.4 CITY-ST-ZIP | |
| TITLE | DVT | 2.1 TITLE | X Change ☐ Addition |
| NAME | HOPKINS, RICHARD | 2.2 NAME | |
| STREET ADDRESS | 171 HOOD AVE., #21 | 2.3 STREET ADDRESS | 91971 OVERSEAS Hwy |
| CITY-ST-ZIP | TAVERNIER FL | 2.4 CITY-ST-ZIP | |
| TITLE | DS | 3.1 TITLE | X Change ☐ Addition |
| NAME | GRIERSON, MARILYN | 3.2 NAME | |
| STREET ADDRESS | 171 HOOD AVE., #21 | 3.3 STREET ADDRESS | 91971 OVERSEAS Hwy |
| CITY-ST-ZIP | TAVERNIER FL | 3.4 CITY-ST-ZIP | |
| TITLE | | 4.1 TITLE | ☐ Change ☐ Addition |
| NAME | | 4.2 NAME | |
| STREET ADDRESS | | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 4.4 CITY-ST-ZIP | |
| TITLE | | 5.1 TITLE | ☐ Change ☐ Addition |
| NAME | | 5.2 NAME | |
| STREET ADDRESS | | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 5.4 CITY-ST-ZIP | |
| TITLE | | 6.1 TITLE | ☐ Change ☐ Addition |
| NAME | | 6.2 NAME | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 6.4 CITY-ST-ZIP | |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and [illegible] do 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 [illegible] 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 empowe[illegible] 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 addition.

SIGNATURE: Marilyn J. Grierson 1/20/95 (305) 852 1245
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRE[illegible] Date Daytime Phone #
MARILYN J GRIERSON

0428A40 FP