


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

<b>DOCUMENT # L09924</b> 1. Entity Name <b>NEPTUNE TOWING COMPANY</b>						<b>FILED</b>  <b>07 APR -3 PM 2:28</b>  SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business <b>3670 S. WESTSHORE BOULEVARD TAMPA, FL 33629</b>				Mailing Address <b>3670 S. WESTSHORE BOULEVARD TAMPA, FL 33629</b>			
2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.				3. Mailing Address  Suite, Apt. #, etc.			
City & State  Zip      Country				4. FEI Number <b>01042007      Chg-P      CR2E034 (12/06)</b> <b>59-2963795</b>			
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				Applied For Not Applicable			
6. Name and Address of Current Registered Agent  <b>VONSPIEGELFELD, ALLEN K 501 EAST KENNEDY BLVD. SUITE 1700 TAMPA, FL 33602</b>				7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code			
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>							
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DPST DANN, RODNEY H 3670 S. WESTSHORE BLVD. TAMPA, FL 33629			TITLE NAME STREET ADDRESS CITY - ST - ZIP	VICE President Stephen Dann 3670 S. Westshore Blvd Tampa, FL 33629		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AS VONSPIEGELFELD, ALLEN K 501 E KENNEDY BLVD #1700 TAMPA, FL 33602			TITLE NAME STREET ADDRESS CITY - ST - ZIP	300096244843 04/09/07--01045--019 **\$900.00		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.							
SIGNATURE: <i>Rodney L Dann Jr</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				2-2-07 (813)251-5100 <small>Date Daytime Phone #</small>			