

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # L18147

1. Corporation Name

THE SUPPLY DOCK, INC.

Principal Place of Business

139 W. GORRIE DRIVE  
ST GEORGE ISLAND FL 32328  
US

Mailing Address

139 W GORRIE DRIVE  
ST GEORGE ISLAND FL 32328  
US



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/25/1989

4. FEI Number

59-2974995

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 owes the current year  
Intangible Personal Property.

☐

Yes ☐ No

9. Name and Address of Current Registered Agent

GROSS, THOMAS P.  
BOX 112  
ST. GEORGE ISLAND, EASTPOINT, FL 32328

10. Name and Address of New Registered Agent

81 Name Ray Walding  
82 Street Address (P.O. Box Number Is Not Acceptable)  
1305 Woodward Ave  
83  
84 City Port St Joe FL 85 Zip Code 32456

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 re-instating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DPT	<input checked="" type="checkbox"/> DELETE
NAME	GROSS, THOMAS P.	
STREET ADDRESS	336 BROWN ST	
CITY-ST-ZIP	ST. GEORGE ISLD FL	
TITLE	VPS	<input checked="" type="checkbox"/> DELETE
NAME	GROSS, A. JEAN	
STREET ADDRESS	336 BROWN ST	
CITY-ST-ZIP	ST. GEORGE ISLD FL	
TITLE	Pres.	<input type="checkbox"/> DELETE
NAME	Ray Walding	
STREET ADDRESS	1305 Woodward Ave	
CITY-ST-ZIP	Port St Joe, FL 32456	
TITLE	Vice Pres.	<input type="checkbox"/> DELETE
NAME	Marlene Walding	
STREET ADDRESS	1305 Woodward Ave	
CITY-ST-ZIP	Port St Joe, FL 32456	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

000002961920--2  
-08/17/99--01043--003  
\*\*\*\*150.00 \*\*\*\*150.00

KE

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(l), 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:

Ray Walding

7-20-99

927-2674

CR2E034 (5/99)

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99 AUG -9 AM 8:50  
DIVISION OF STATE  
TALLAHASSEE, FLORIDA

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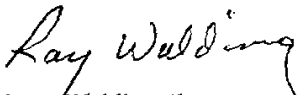
FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
P O BOX 6327  
TALAHASSEE, FL 32314

RE: THE SUPPLY DOCK , INC.  
Ref. letter number: 199A00039266

Kristen Eckel:  
Document Specialist

I am returning the completed annual report with corrections. Kristen , I am stating and I assure you I did not receive the first notice from your department. Had I received the first notice this would not have happened. Thanks for your help in this matter.

Sincerely ,



Ray Walding, Pres.