

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 4/1/95: \$275 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

PROFIT CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Diana B. Mathern
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 JUL -6 AM 8:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **L61703** (9)

1. Corporation Name
MOSS MARINE OF CLEARWATER, INC.

Principal Place of Business: **13880 S. TAMIAM TRL. 3322 FOWLER STREET FORT MYERS FL 33901 US**
Mailing Address: **13880 S TAMIAM TRAIL 3322 FOWLER STREET FORT MYERS FL 33912 US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/30/1990	3a. Date of Last Report 04/01/1994
4. FEI Number 65-0197143	Approved For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 193.032 Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Previous Form of Business	2a. Mailing Address
21. State, Apt. #, etc.	26. State, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. County	29. County
25. Country	30. Country

9. Name and Address of Current Registered Agent FREELAND, GEORGE T. 13880 S. TAMIAM TRL. FORT MYERS FL 33912	10. Name and Address of New Registered Agent B1. Name B2. Street Address (P.O. Box Number is Not Acceptable) B3. B4. City FL B5. Zip Code
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11. Pursuant to the provisions of Sections (607.0502 and) (607.1508), Florida Statutes, the above-named corporation submits the 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: _____ DATE: _____

12. OFFICERS AND DIRECTORS		13. ADVERTISEMENTS TO OFFICERS AND DIRECTORS IN 12	
12.1 NAME STREET ADDRESS CITY, STATE, ZIP	DP FREELAND, GEORGE T. 13880 S. TAMIAM TRL. FORT MYERS FL	13.1 NAME STREET ADDRESS CITY, STATE, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Ass'n
12.2 NAME STREET ADDRESS CITY, STATE, ZIP	D FREELAND, BERNARD G. 13880 S. TAMIAM TRL. FORT MYERS FL	13.2 NAME STREET ADDRESS CITY, STATE, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Ass'n
12.3 NAME STREET ADDRESS CITY, STATE, ZIP	S FREELAND, GEORGE T. 13880 S. TAMIAM TRL. FT MYERS FL	13.3 NAME STREET ADDRESS CITY, STATE, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Ass'n
12.4 NAME STREET ADDRESS CITY, STATE, ZIP		13.4 NAME STREET ADDRESS CITY, STATE, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Ass'n
12.5 NAME STREET ADDRESS CITY, STATE, ZIP		13.5 NAME STREET ADDRESS CITY, STATE, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Ass'n
12.6 NAME STREET ADDRESS CITY, STATE, ZIP		13.6 NAME STREET ADDRESS CITY, STATE, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Ass'n
12.7 NAME STREET ADDRESS CITY, STATE, ZIP		13.7 NAME STREET ADDRESS CITY, STATE, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Ass'n

14. I, the undersigned, certify that the information contained within this report is accurately furnished and does not apply for the exemption stated in Section 193.032(1)(b), Florida Statutes. I further certify that the information contained on this annual report or financial annual report is true and accurate and that my corporation shall bear the same legal effect as if made under oath. That I am an officer or director of the corporation or the secretary or treasurer empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or 13 of this report.

SIGNATURE: George Freeland
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-27-95 (94) 433-8334

CR2E034 (3/95)