

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

1995



SECRETARY OF STATE
CORPORATIONS

FILED
SECRETARY OF STATE
CORPORATIONS

DOCUMENT # **L84101** (9)

95 MAY -1 PM 1:34

KEITH MARINE, INC.

OFFICE BOX 4730
PALATKA FL 32177

OFFICE BOX 4730
PALATKA FL 32177

STATE OF FLORIDA

3. (Effective Date of Filing) **06/26/1990** 3a. (Date of Last Report) **07/19/1994**

21. Principal Office Address 1063 BULKHEAD RD	26. Mailing Address 1063 BULKHEAD RD	4. Filing Number 59-3015688	Applied For Not Applicable
22. State of Florida	27. State of Florida	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23. GREEN COVE SPRINGS, FL	28. GREEN COVE SPRINGS FL	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24. 32043	25. 32043	29. 32043	30. 32043

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**KEITH, GRACE
292 BRIGHTON COURT
ST. AUGUSTINE FL 32045**

B1. Name COLLEEN DE SANTIS
B2. Street Address (P.O. Box Number is Not Acceptable) 1519 HIGH ST.
B3. City PALATKA
B4. State FL
B5. Zip Code 32177

I, the undersigned, being a resident of the State of Florida, do hereby certify that the above named corporation submits this statement for the purpose of changing its registered office as reported on last annual report and that the above information is true and correct. I am a director or officer of the corporation and the undersigned registered agent.

[Signature]

5-12-95

12. CURRENTLY LISTED OFFICERS	13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS																																																																				
<table border="1"> <tr> <td>NAME</td> <td>PD KEITH, KEVIN H. 2504 FAIRWAY DR PALATKA FL</td> <td>STATUS</td> <td><input type="checkbox"/> Change <input type="checkbox"/> Add</td> </tr> <tr> <td>NAME</td> <td>D KEITH, GRACE 292 BRIGHTON COURT ST. AUGUSTINE FL</td> <td>STATUS</td> <td><input checked="" type="checkbox"/> Change <input type="checkbox"/> Add</td> </tr> <tr> <td>NAME</td> <td>STD DESANTIS, COLLEEN M. 1519 HIGH ST PALATKA FL</td> <td>STATUS</td> <td><input type="checkbox"/> Change <input type="checkbox"/> Add</td> </tr> <tr> <td>NAME</td> <td>D KEITH, BRIAN E. POB 1441 PALATKA FL</td> <td>STATUS</td> <td><input type="checkbox"/> Change <input type="checkbox"/> Add</td> </tr> <tr> <td>NAME</td> <td>D MALTBY, ANDREA T. POB 576 HASTINGS FL</td> <td>STATUS</td> <td><input type="checkbox"/> Change <input type="checkbox"/> Add</td> </tr> <tr> <td>NAME</td> <td>GD KEITH, RICHARD J. 292 BRIGHTON COURT ST. AUGUSTINE FL</td> <td>STATUS</td> <td><input checked="" type="checkbox"/> Change <input type="checkbox"/> Add</td> </tr> </table>	NAME	PD KEITH, KEVIN H. 2504 FAIRWAY DR PALATKA FL	STATUS	<input type="checkbox"/> Change <input type="checkbox"/> Add	NAME	D KEITH, GRACE 292 BRIGHTON COURT ST. AUGUSTINE FL	STATUS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Add	NAME	STD DESANTIS, COLLEEN M. 1519 HIGH ST PALATKA FL	STATUS	<input type="checkbox"/> Change <input type="checkbox"/> Add	NAME	D KEITH, BRIAN E. POB 1441 PALATKA FL	STATUS	<input type="checkbox"/> Change <input type="checkbox"/> Add	NAME	D MALTBY, ANDREA T. POB 576 HASTINGS FL	STATUS	<input type="checkbox"/> Change <input type="checkbox"/> Add	NAME	GD KEITH, RICHARD J. 292 BRIGHTON COURT ST. AUGUSTINE FL	STATUS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Add	<table border="1"> <tr> <td>NAME</td> <td></td> <td>STATUS</td> <td></td> </tr> <tr> <td>NAME</td> <td></td> <td>STATUS</td> <td></td> </tr> <tr> <td>NAME</td> <td></td> <td>STATUS</td> <td></td> </tr> <tr> <td>NAME</td> <td></td> <td>STATUS</td> <td></td> </tr> <tr> <td>NAME</td> <td></td> <td>STATUS</td> <td></td> </tr> <tr> <td>NAME</td> <td></td> <td>STATUS</td> <td></td> </tr> <tr> <td>NAME</td> <td></td> <td>STATUS</td> <td></td> </tr> <tr> <td>NAME</td> <td></td> <td>STATUS</td> <td></td> </tr> <tr> <td>NAME</td> <td></td> <td>STATUS</td> <td></td> </tr> <tr> <td>NAME</td> <td></td> <td>STATUS</td> <td></td> </tr> <tr> <td>NAME</td> <td></td> <td>STATUS</td> <td></td> </tr> </table>	NAME		STATUS		NAME		STATUS		NAME		STATUS		NAME		STATUS		NAME		STATUS		NAME		STATUS		NAME		STATUS		NAME		STATUS		NAME		STATUS		NAME		STATUS		NAME		STATUS	
NAME	PD KEITH, KEVIN H. 2504 FAIRWAY DR PALATKA FL	STATUS	<input type="checkbox"/> Change <input type="checkbox"/> Add																																																																		
NAME	D KEITH, GRACE 292 BRIGHTON COURT ST. AUGUSTINE FL	STATUS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Add																																																																		
NAME	STD DESANTIS, COLLEEN M. 1519 HIGH ST PALATKA FL	STATUS	<input type="checkbox"/> Change <input type="checkbox"/> Add																																																																		
NAME	D KEITH, BRIAN E. POB 1441 PALATKA FL	STATUS	<input type="checkbox"/> Change <input type="checkbox"/> Add																																																																		
NAME	D MALTBY, ANDREA T. POB 576 HASTINGS FL	STATUS	<input type="checkbox"/> Change <input type="checkbox"/> Add																																																																		
NAME	GD KEITH, RICHARD J. 292 BRIGHTON COURT ST. AUGUSTINE FL	STATUS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Add																																																																		
NAME		STATUS																																																																			
NAME		STATUS																																																																			
NAME		STATUS																																																																			
NAME		STATUS																																																																			
NAME		STATUS																																																																			
NAME		STATUS																																																																			
NAME		STATUS																																																																			
NAME		STATUS																																																																			
NAME		STATUS																																																																			
NAME		STATUS																																																																			
NAME		STATUS																																																																			

I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and is true and correct for the purposes stated herein and that the undersigned is a director or officer of the corporation and the undersigned registered agent. I am a director or officer of the corporation and the undersigned registered agent.

SIGNATURE: *Grace Keith*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
GRACE KEITH

4/21/95 904-284-2849