## **FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00**

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jun 18 1997 8:00am

Secretary of State

Secretary calle . DIVISION OF CORPORATIONS

1997

DOCUMENT # L95133 (9) 1. Corporation Name NEPTUNE MARINE, INC. OF TARPON SPRINGS  Principal Place of Business 1046 ISLAND AVENUE TARPON SPRINGS FL 34689  TARPON SPRINGS FL 34689									
		•				3. Date incorporated or Qualified 08/13/1990	,	ate of Last F	Report
2. Principal Place of Business		2a. Mailing Address			4. FEI Number	-ئــ ا-		pplied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			¢0.75 A.J.			ot Applicable	
22		27			5. Certificate of Status Dosired			equired	
City & State		City & State			Election Campaign Financing     Trust Fund Contribution			May Be to Fees	
Zip 24	Country 25	Zip Country 30			8. This corporation has liability for i	ntangible		s. 199.032,	
[24]	9. Name and Address of Curre		130			10. Name and Address of New Re			
	RELLY, RANDY		8	31	Name		<del></del>	~ <del>7</del>	
1046 ISLAND AVENUE TARPON SPRINGS FL 34689		82 Street Ac		Street Addre	ess (P.O. Box Number is Not Acceptab	lo)			
· .	1 011 01 1111100 1 1 01000		Ē	13				•	
ı			1	34	City		FL	<b>85 Z</b> ip	Code
office or r agent. I a SIGNATURE	m familiar with, and accept the oblig	ations of, Section 607.0505, F	lorida Statu	les.		oration submits this statement for the poor's board of directors. I horeby accept distribution of the poor state of the	DATE	<del></del>	
TITLE	PO	RRELLY, RANDY		E				Change	Addition
NAME				E					
STREET ADDRESS	1046 ISLAND AVE. TARPON SPRINGS FL	E1		1.3 STREET ADDRESS					
CITY-ST-ZIP TITLE	VSTD	DELETE		1.4 CITY - ST - ZIP 2.1 TITLE				Change	Addition
NAME	CURRELLY, BRAD			2.2 NAME					
STREET ADDRESS	1046 ISLAND AVE.	2.3 STREET ADD		ADDRESS					
CITY-ST-ZIP	TARPON SPRINGS FL		2 4 CITY-ST-ZIP		- ZIP				1220
TITLE NAME		☐ DELETE		3 1 TITUE 3 2 NAME				☐ Change	
STREET ADDRESS			1		ADDRESS				
CITY+ST-ZIP				3.4. CITY - S1 - ZIP					
TITLE		☐ DELE1E		4.1 TOLE				Change	Addition
NAME			4. 2 NAI		}				
STREET ADDRESS			4 3 STRE						,
CITY-ST-ZIP TITLE				4.4 City-St-ZiP 5.1 Title				Change	Addition
NAME	l		- 1	5.2 NAME					
STREET ADDRESS					ADDRESS				
CITY+ST-ZIP			5.4 City	5.4 CHY+ST+ZIP				· •	
TITLE	1		1	6 1 111LE				☐ Change	☐ Addition
NAME			6.2 NAM		Director				
STREET ADDRESS			635TRE	EF#	ADDRESS .				

14. I do hereby certify that the information supplied with this filing does 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 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 12 of changes, of on an infactment with an address.