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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jan 15 1997 8:00am

Secretary of State

941-466-7575

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M75301

(5)

Mailing Address

DOCKS AND LIFTS, INC.

appears in Block 12 or Block

SIGNATURE:

Principal Place of Business

15775 PINE RIDGE RD. FT. MYERS FL 33908 US		15775 PINE RIDGE ROAD FT. MYERS FL 33908-2632 US					
					3. Date Incorporated or Qualified 04/05/1988	3a. Date of Last 01/25/1996	
2. Principal Place of Business		28. Mailing Address	2a. Mailing Address		4. FEI Number		Applied For
21		26			65-0078036 Not Applicable		
Suite. Apt. #, etc.		Suite, Apt #, etc	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State	├ղ ´		6. Election Campaign Financing		
23	Zip Zip		Countr		Trust Fund Contribution		
Zp	25	29	30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes X Yes No		
24	9. Name and Address of Current Registered Agent		130		10. Name and Address of New Registered Agent		
KELL	Y, TIM A		81	Name			
	5 PINE RIDGE RD.		0,	Ctroot Add	roos (P.O. Poy Number is Not Acceptab	(a)	
	IYERS FL 33908		B2 Stre		Address (P.O. Box Number is Not Acceptable)		
• • • • • • • • • • • • • • • • • • • •			83	B			
			84	City		85 Z	ip Code
			1	City			ip Code
office or re	to the provisions of Sections 607.05 egistered agent, or both, in the Stat m familiar with, and accept the oblic	of Florida. Such change was	authorized b	y the corpora	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of changing it the appointment	g its registered as registered
SIGNATURE	Signal see Typed or printed name of registered as	and one triang send on the that	TF: How stored A	reat constants toor	ired when reinstating)	DATE	
12.		ID DIRECTORS	13.	je i: signature requi	ADDITIONS/CHANGES TO OFFICE		ORS IN 12
TITLE	VD	DELETE	1 1 TITLE			☐ Chang	
NAME	KELLY, TIM A		1.2 NAME				
STREET ADDRESS	15775 PINE RIDGE RD.		1 3 STREE	T ADDRESS			
CITY - S1 - ZIP	FT MYERS FL		1.4 CITY-	ST-ZIP			
TOLE	Р	DELETE	21 TITLE			☐ Chang	ge 🔲 Addition
NAME	KELLY, DANNY M.		2.2 NAME				
STREET ADDRESS	15775 PINE RIDGE RD.			T ADDRESS			
CITY-ST-712	FT. MYERS FL		2. 4 CITY	-ST-ZIP			T Address
TIFLE	ST DELETE		3.1 7171.6			[_] Chang	ge 🔲 Addition
NAME	SALO, DAVID B 15775 PINE RIDGE RD.		3.2 NAME				
STREET ADDRESS	FT. MYERS FL			T ADDRESS			
CITY-SI-Z:P TITLE	II. MICHOIL	DELETE	3.4. CITY 4.1 TITLE			Chang	e Addition
NAME			4. 2 NAM	ì			,-
STREET ADDRESS				T ADDRESS			
C(TY+ST-ZIP			4.4 CITY-				
TITLE		DELETE	5 1 TITLE			☐ Chang	ge Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STRE	T ADDRESS			
CITY - ST-ZIP			5.4 CITY	ST-ZP			
THTLE		DELFTE	6.1 TITLE			Chang	ge Addition
NAME			6.2 NAMI				
STREET ACCRESS			6.3 STRE	ET ADDRESS			
CHY-ST-ZIP			6.4 CITY				
14. I do herel	by certify that the information supplied in indicated on this suggest report or	ed with this filing does not qua	alify for the ex	emption state	ed in Section 119.07(3)(i), Florida Statute at my signature shall have the same lega	s. I further certify the	nat the under path: that
am an o	ficer or airector of the apporation of	or the receiver or trustee empo	owered to exe	ecute this repo	ort as required by Chapter 607, Florida S	statutes; and that m	ny name