

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000633

FILED  
Apr 27, 2005  
Secretary of State

Entity Name: MARITIME DISCIPLESHP, INC.

## Current Principal Place of Business:

89655 OVERSEAS HWY.  
TAVERNIER, FL 33070

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 89004  
TAMPA, FL 33689

## New Mailing Address:

FEI Number: 37-1456404      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SIMON, MARLIN H  
89655 OVERSEAS HWY.  
TAVERNIER, FL 33070      US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: MAHON, CLIFTON R JR.  
Address: P.O. BOX 89004  
City-St-Zip: TAMPA, FL 33689

Title: SD ( ) Delete  
Name: MAHON, LYNN M  
Address: P.O. BOX 89004  
City-St-Zip: TAMPA, FL 33689

Title: D ( ) Delete  
Name: SIMON, MARLIN H  
Address: 243 HIBISCUS ST.  
City-St-Zip: TAVERNIER, FL 33070

Title: TD ( ) Delete  
Name: HANSON, ALAN  
Address: 126 W. MAIN STREET  
City-St-Zip: FROSTBURG, MD 21532

Title: D ( ) Delete  
Name: JONCAS, JOE  
Address: 101 NE 35TH ST.  
City-St-Zip: NEWPORT, OR 97365

Title: D ( ) Delete  
Name: TEETER, OLIE  
Address: 12310 TOWN CREEK ROAD  
City-St-Zip: FLINTSTONE, MD 21530

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: SASSER, JOHN  
Address: 37 N. CROMWELL RD  
City-St-Zip: SAVANNAH, GA 31410

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN SASSER

PD

04/27/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date