FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

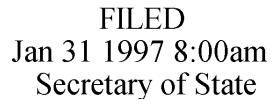
1997 DOCUMENT #
1. Corporation Name

N11664

ATLANTIC AND GULF COASTS DOCKING PILOTS ASSOCIAT ION, INC.

Principal Place of Business

Mailing Address





ROUTE 1 BOX 700 BRANFORD FL 32008				ROUTE 1 BOX 700 BRANFORD FL 32008-9773					<u> </u>	ate Incorporated o	v Qualified	Tae Do	te of Last F	Donort 1
								"	, D	10/18/1985	ii Quanileu	3a , Da	02/07/19	96
Principal Place of Business 1				2a. Mailing Address					l. FE	Number 59-2701672		<u> </u>		pplied For ot Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.					i. C	ertificate of Status	Desired			Additional equired
City & State				City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees						
Zip 24	ļ ₁	ountry	}n	Zip Country 30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes							
24 25 29 3 9. Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent							
						81	Name							*
MOORE, GEORGE L.								A ad al a a a a 45		Day March and a	lat 4 a a a state	1-1		
ROUTE 1, BOX 700							Street	Address (F	(P.O	. Box Number is N	iot Acceptab	ie)		
	ORD FL 32008		·	63										
						64	City		-				85 Zip	Code
	······································						'					FL	1 1	
11. Pursuant office or r	to the provisions o	f Sections 617.05 r both, in the State	02 and 617 e of Florida	. 1508, Florida Statu . Such change was	tes, the a authorize	bove d by	e-named	corporation s	on s boa	ubmits this statem	ent for the p	urpose of	changing i	ts registered
agent. I a	ım familiar with, an	d accept the oblig	ations of,	Section 617.0503, FI	orida Sta	tutes	S.	JOT 41,01. 0	-		10.00) accor	i in uppi	J., 1011 GC	7.09.0.0700
SIGNATURE ,														
12.							ent signature	required wher		DITIONS/CHANGE	S TO OFFIC	DATE FRS AND	DIRECTO	RS IN 12
TITLE	DP	OIT ICE IIO 711	io Diricol	DELETE	13. 1.1 T	TLE			710	Dirionojoi mirai	20 10 0.110	LITOTAL	Change	Addition
NAME	REGISTER, J	AMES R			1.2 N	AME								_
STREET ADDRESS	222 CAMIELI				1.3 \$	TREET	ADDRESS							
CITY - ST - ZIP	WILMINGTON	I NC			1.4 C	ITY-\$	IT-ZIP						/	
TITLE	DVP			DELETE	2.1 (TLE		DVF	P				Change	Addition
NAME	NAUGHTON,				2.2 N	AME		DAV	VII	P. GALMA	N			
STREET ADDRESS		ADOW-DR-#4					2.3 STREET ADDRESS			SAMOSET AV				
CITY-ST-ZIP	DOULESTON	M-PA		[ST-ZIP			Y, MASS.				
TITLE	D			DELETE	3.1 7			D			•		Change	☐ Addition
NAME	PARKER, DO				3.2 N				DEI	RICK R. TH	IOMAS			
STREET ADDRESS	-25-8 R0300						ADDRESS			BROOKMONT		LST		
CITY-ST-ZIP TITLE	<u>PONTE VEDI</u> DST	C DEAUTH FL	-	DELETE	3.4. (4.1 T	_	ST-ZIP			NVILLE, F			Change	☐ Addition
NAME :	MOORE, GE	מסמב ו		otter		IAME				• -	•		□ ∩∪απ γ α	- Manitoli
STREET ADDRESS	RT 1 BOX 70						ADDRESS							
CITY-ST-ZIP	BRANFORD						T-ZIP							
TITLE	D	_		DELETE	5.1 T		. 211				•		☐ Change	Addition
NAME	ACKERMAN,	JAMES T.			5.2 N								. = •	
STREET ADDRESS		SONG LOOP S	3				ADORESS							
CITY-ST-ZIP	JACKSONVIL						ST-ZIP							
TITLE		**************************************		☐ DELETE	6.1 T								Change	Addition
NAME					6.2 N	AME								
STREET ADDRESS					6.3 \$	TREET	ADDRESS							
CITY-ST-ZIP					6.4 C	ITY-\$	IT-ZIP							
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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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with paddress.

GEORGE I MOORE