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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 03, 1999 8:00 am
Secretary of State

03-03-1999 90073 035 ****61.25

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DOCUMENT # N11664

1. Corporation Name

ATLANTIC AND GULF COASTS DOCKING PILOTS ASSOCIATION, INC.

Principal Place of Business

ROUTE 1 BOX 700
BRANFORD FL 32008

Mailing Address

ROUTE 1 BOX 700
BRANFORD FL 32008



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip 25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip 29 Country

3. Date Incorporated or Qualified

10/18/1985

4. FEI Number

59-2701672

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

MOORE, GEORGE L.
ROUTE 1, BOX 700
BRANFORD FL 32008

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP
NAME REGISTER, JAMES R
STREET ADDRESS 506 VAN DORN CT
CITY-ST-ZIP WILMINGTON NC 28412 ☒ DELETE

TITLE DVP
NAME GALMAN, DAVID P
STREET ADDRESS 185 SAMOSET AVE
CITY-ST-ZIP QUINCY MA ☒ DELETE

TITLE D
NAME THOMAS, FREDERICK
STREET ADDRESS 1306 BROOKMONT AVE EAST
CITY-ST-ZIP JACKSONVILLE FL ☒ DELETE

TITLE DST
NAME MOORE, GEORGE L
STREET ADDRESS RT 1 BOX 700
CITY-ST-ZIP BRANFORD FL ☐ DELETE

TITLE D
NAME ACKERMAN, JAMES T.
STREET ADDRESS 11540 WOODSONG LOOP S
CITY-ST-ZIP JACKSONVILLE FL ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DP ☒ Change ☐ Addition
1.2 NAME DAVID P. GALMAN
1.3 STREET ADDRESS 185 SAMOSET AVENUE
1.4 CITY-ST-ZIP QUINCY, MS 02169

2.1 TITLE DVP ☒ Change ☐ Addition
2.2 NAME HICKEY, JAMES
2.3 STREET ADDRESS 2306 FOX-CHASE COURT
2.4 CITY-ST-ZIP BELAIR, MD 21015

3.1 TITLE D ☒ Change ☐ Addition
3.2 NAME THOMAS, FREDERICK R.
3.3 STREET ADDRESS 3307 ABBYFIELD DRIVE EAST
3.4 CITY-ST-ZIP JACKSONVILLE, FL. 32277

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE D ☒ Change ☐ Addition
5.2 NAME ACKERMAN, JAMES T.
5.3 STREET ADDRESS 12141 RUNNING BROOK DRIVE
5.4 CITY-ST-ZIP JACKSONVILLE, FL. 32225

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I 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 an address with all other like empowered.

SIGNATURE:

GEORGE MOORE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/15/1999

Date

904-935-0209

Daytime Phone #

CR2E037 (11/98)