

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41999

FILED  
Apr 28, 2008  
Secretary of State

**Entity Name:** MARINE CONTRACTORS' ASSOCIATION OF NORTH FLORIDA, INC.

**Current Principal Place of Business:**

509 APACHE ST.  
FORT WALTON BEACH, FL 32547

**New Principal Place of Business:**

**Current Mailing Address:**

509 APACHE ST.  
FORT WALTON BEACH, FL 32547

**New Mailing Address:**

**FEI Number:** 59-3063798

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HARTZOG, PAUL  
22 NW MAPLES ST  
FORT WALTON BEACH, FL 32548 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: HARTZOG, PAUL  
Address: 22 NW MAPLES ST  
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: VPD ( ) Delete  
Name: LOFTIS, JOHN  
Address: 4599 SPANISH TRAIL, SUITE A  
City-St-Zip: PENSACOLA, FL 32504

Title: TD ( ) Delete  
Name: MARCEAU, DAN  
Address: 224 CALIFORNIA DR  
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: SD ( ) Delete  
Name: LANCASTER, WAYNE  
Address: 509 APACHE ST  
City-St-Zip: FORT WALTON BEACH, FL 32547

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 exemption stated in Chapter 119, 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: WAYNE LANCASTER

SEC

04/28/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date