NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # N93000000098

1. Corporation Name

SOUTHERN OCEANS ARCHAEOLOGICAL RESEARCH, INC.

Principal Place of Business

Mailing Address

1205 MALDONADO DRIVE PENSACOLA BEACH FL 32561

2. Principal Place of Business

Suite, Apt. #, etc.

21

P.O. BOX 13512 PENSACOLA FL 32591

2a. Mailing Address

Suite, Apt. #, etc.

## FILED May 10, 1999 8:00 am § Secretary of State

05-10-1999 90222 021 \*\*\*\*70.00



Applied For

3. Date Incorporated or Qualifed

12/29/1992

4. FEI Number

City & State  City & State  28  City & State  5. Certificate of Status Desired Fee Required  State  City & State  5. Certificate of Status Desired Fee Required  Fee Required  \$5.00 May Be  Added to Fees	22		27			59-3185783	Not	t Applicable	
20   20   20   20   20   20   30   30					***	5. Certificate of Status Desired			
3. Name and Address of Current Registered Agent  9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  11. Name  12. Name and Address of New Registered Agent  12. Name and Address of New Registered Agent  13. Name  14. Name and Address of New Registered Agent  15. Name  16. Name and Address of New Registered Agent  16. Name and Address of New Registered Agent  17. Pursuant to the provisions of Sections 617 0502 and 617 1508, Florida Statutes. The above-manned corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617 0503, Florida Statutes. The above-manned corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617 0503, Florida Statutes. The above-manned corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617 0503, Florida Statutes. The above-manned corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617 0503, Florida Statutes. The above-manned corporation's board of directors. I hereby accept the appointment as registered agent agents agent submits in the statement for the purpose of changing its registered agent agents agent	23		28			7	Fee Re	quired	
9. Name and Address of Current Registered Agent  9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  11. Parsuant 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 agent. I am minitar with, and except the obligation of, Section 157,0509. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am minitar with, and except the obligation of, Section 157,0509. Florida Statutes.  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 agent. I am minitar with, and except the obligation of, Section 157,0509. Florida Statutes.  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. CIV. ST. ZP  15. TITLE  10. ORANGE.  15. WENTEL ADDRESS  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  15. TITLE  16. Change Addition  16. Change Addition  17. Addition  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  19. Change Addition  1	Zip	Country Zip		Country		6. Election Campaign Financing	•		
FRANKLIN, MARIANNE 1205 MALDONADO DRIVE PENSACOLA BEACH FL 32561  83  84	24	25 29							
FRANKLIN, MARIANNE 1205 MALDONADO DRIVE PENSACOLA BEACH FL 32561  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 agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE Signature, typed or printed name of irregistered agent and the 4 applicable.  NoTE: Registered Apert signature required when reinstating)  MORRIS, III J  SIRRET ADDRESS  OTI-SIZ-P  TITLE  DO DELETE  1.1 TITLE  1.2 NAME  1.2 NAME  1.2 NAME  1.2 NAME  1.2 NAME  1.2 STREET ADDRESS  0.1 STREET ADDRESS  0.2 STREET ADDRESS  0.3 STREET ADDRESS  0.3 STREET ADDRESS  0.4 CIT'-ST-ZP  1.1 III.  1.2 NAME  1.3 STREET ADDRESS  0.4 CIT'-ST-ZP  1.3 STREET ADDRESS  0.4 CIT'-ST-ZP  1.4 STREET ADDRESS  0.5 S		9. Name and Address of Current	Registered Agent		·	10. Name and Address of New Registe	red Agent		
120S MALDONADO DRIVE PENSACOLA BEACH FL 32561  88				81	Name				
PENSACOLA BEACH FL 32561  84 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, and office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation submitte this statement for the purpose of changing its registered agent, and accept the obligations of, Section 617,0503, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  14. CITY-ST-ZIP  MORRIS, III J  STREET ADDRESS  ORY-ST-ZIP  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  D  ROBERT ADDRESS  TITLE  D  ROBERT ADDRESS  STREET ADDRESS  CITY-ST-ZIP  TITLE  D  ROBERT CK, MATHER  STD  ROBERT					Street Add	ress (P.O. Box Number is Not Acceptable)			
PENSACULA BEACH FL 32561  B4 City FL 85 Zip Code  T1. 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 degistering specific 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 or both, and accept the obligations of speciators. Section 817,0503, Florida Statutes.  SIGNATURE  Signature, typed or protect quarter of registered agent and tile if speciators.  PO OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE PD OBJECT STATE									
The provisions of Sections 617.0502 and 617.1508, Florids Statutes, the above-named corporation submits this statement for the purpose of changing its 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, 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 agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  12.	PENSACC	OLA BEACH FL 32561		83	<b>'</b>				
11. Pursuant to the provisions of Sections 617-0502 and 617-1506, Florida Statutes, the above-named corporation submite this statement for the purpose of changing its registered office or registered agent, and accept the obligations of, Section 617-0503, Florida Statutes.  SIGNATURE    Committee   Committ				84	City		85 Zip C	Code	
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 in familiar with an analysis and accept the obligations of, Section 617,050,7, Florida Statutes.  SIGNATURE    Signatur, hyped of printed name of registered agent and this 4 applicable.   MOTE Registered Agent signatures   MOTE Registered Agent signature						-		registered	
Agent. 1 am familiar with, and accept the obligations of, Section 617, USUS, Flondas Statutes.  SIGNATURE    20	office or s	egistered agent, or both, in the State of	f Florida. Such change was a	luthorized by	the corporati	poration submits this statement for the purpos ion's board of directors. I hereby accept the a	ppointment as rec	gistered	
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12.	SIGNATURE					DAT			
TITLE	12	Signature, typed or printed name of registered agent and title if applicable. (NOTE:			gistaleo Aguit signaturo rodonos mini remenenty				
MORRIS, III J   12   13   13   14   14   15   15   15   16   16   16   16   16							*		
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13(7-8)-7/9	STREET ADDRESS			6.3 STREE	TADORESS				
	CITY-ST-ZIP								

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:

SIGNATURE REQUIRED
NATURE AND TYPED OR PRIMED HAME OF SIGNING OFFICER OR DIRECTOR

May 1999 (550) 57 37 63

R2E037 (11/98)