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FILED  
May 06 1997 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N95000002839 (7)

1. Corporation Name

INTERNATIONAL MARINE RESEARCH INSTITUTE, INC.



Principal Place of Business

737 BYWOOD DRIVE, NE  
PALM BAY FL 32905

Mailing Address

737 BYWOOD DRIVE, NE  
PALM BAY FL 32905-5425

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

3. Date Incorporated or Qualified

06/09/1995

3a. Date of Last Report

05/01/1996

4. FEI Number

59-3350894

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THOMAS, RUSSELL M  
737 BYWOOD DRIVE, NE  
PALM BAY FL 32905

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 NAME ☐ DELETE

NAME D  
STREET ADDRESS THOMAS, MERRITT F  
CITY-ST-ZIP 1406 ALBERNI STREET N.W.  
PALM BAY FL 32907

TITLE NAME ☐ DELETE

NAME D  
STREET ADDRESS DRANTZ, FRANK  
CITY-ST-ZIP 150 OLD ENGLEWOOD ROAD, #67  
ENGLEWOOD FL 34223-2879

TITLE NAME ☐ DELETE

NAME D  
STREET ADDRESS ALSTON, SAM  
CITY-ST-ZIP P.O. BOX 3486  
FT. PIERCE FL 34948

TITLE NAME ☐ DELETE

NAME D  
STREET ADDRESS CROUTNAMEL, WILLIAM C  
CITY-ST-ZIP 923 S.E. 20TH STREET, D-4  
FT. LAUDERDALE FL 33316

TITLE NAME ☐ DELETE

NAME D  
STREET ADDRESS ROBINSON, LYNN  
CITY-ST-ZIP 1358 CHERRY HILLS DRIVE  
PALM BAY FL 32905

TITLE NAME ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME MERRITT F. THOMAS  
1.3 STREET ADDRESS 2442 BRANDY MILL  
1.4 CITY-ST-ZIP HOUSTON, TX, 77067

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME P/M  
2.3 STREET ADDRESS RUSSELL M THOMAS  
2.4 CITY-ST-ZIP 737 BYWOOD DR. NE  
PALM BAY, FL, 32905

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME V/T/S  
3.3 STREET ADDRESS JANE B. (BETTY) THOMAS  
3.4 CITY-ST-ZIP 737 BYWOOD DR. NE.  
PALM BAY, FL, 32905

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 an address.

SIGNATURE \_\_\_\_\_

CR2E037 (9/96)