2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000051686

1. Entity Name

NAUTICAL SOLUTIONS MARKETING, INC.



FILED Feb 20, 2004 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

DO NOT WRITE IN THIS SPACE

3135 39TH AVENUE NORTH

3135 39TH AVENUE NORTH

SUITE 2 ST. PETERSBURG, FL 33714

ST. PETERSBURG, FL 33714



02112004

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-3721608

Applied For Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FOWLER WHITE BOGGS BANKER P.A. ATTN: DAVID M. DONEY 501 E. KENNEDY BLVD., SUITE 1700

TAMPA, FL 33602

DO NOT WRITE IN THIS SPACE

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or be the obligations of registered agent.	oth, in the State of Florida.	am familiar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)	. <u>.</u> .	ATE
		· ·

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees U00000058654 02/20/04-80047-007 158.75

10.	OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HORNE, MARK J 15604 CHESWICK CT TAMPA, FL 33647
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. 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 report or supplemental 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

MITH

MARIL J. HORNE

2-14-04

287-1330