

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000070007

FILED
Aug 05, 2004
Secretary of State

Entity Name: TRI-STATE MARINE OF FLORIDA, INC.

Current Principal Place of Business:

12 GILCREASE LANE
QUINCY, FL 32351

New Principal Place of Business:

8821 W. TENNESSEE ST
TALLAHASSEE, FL 32304

Current Mailing Address:

12 GILCREASE LANE
QUINCY, FL 32351

New Mailing Address:

8821 W. TENNESSEE ST
TALLAHASSEE, FL 32304

FEI Number: 11-3695474

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CUTRER JR., JOHN J
12 GILCREASE LANE
QUINCY, FL 32351 US

Name and Address of New Registered Agent:

CUTRER, GAIL A
12 GILCREASE LANE
QUINCY, FL 32351 US

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: GAIL A CUTRER

08/05/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: D (X) Delete
Name: CUTRER JR., JOHN J
Address: 12 GILCREASE LANE
City-St-Zip: QUINCY, FL 32351

Title: D () Delete
Name: CUTRER, GAIL A
Address: 12 GILCREASE LANE
City-St-Zip: QUINCY, FL 32351

Title: D () Delete
Name: CARTER, OSWALD D
Address: 12 GILCREASE LANE
City-St-Zip: QUINCY, FL 32351

Title: D () Delete
Name: DITTO, RALPH E
Address: 12 GILCREASE LANE
City-St-Zip: QUINCY, FL 32351

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: KARTER, OSWALD D
Address: 3605 MORSE COURT
City-St-Zip: TALLAHASSEE, FL 32308

Title: D (X) Change () Addition
Name: DANIEL, MCCALL A
Address: 12 GILCREASE LANE
City-St-Zip: QUINCY, FL 32351

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GAIL A CUTRER

PRES

08/05/2004

Electronic Signature of Signing Officer or Director

Date