

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 09, 2007 8:00 am
Secretary of State

04-09-2007 90048 039 ***150.00

DOCUMENT # P04000168148

1. Entity Name

STEVE'S MARINE SERVICES, INC.



Principal Place of Business

3400 PROSPECT AVE
NAPLES FL 34104

Mailing Address

3400 PROSPECT AVE
NAPLES FL 34104



2. Principal Place of Business - No P.O. Box #

3400 Prospect Ave

Suite, Apt. #, etc.

3. Mailing Address

3400 Prospect Ave

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/06)

City & State

Naples FL 34104

City & State

Naples FL

4. FEI Number 20-2093457

Applied For
Not Applicable

Zip

34104

Country

USA

Zip

34104

Country

USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HUMES, STEVE
3400 PROSPECT AVE
NAPLES FL 34104

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when consolidating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME HUMES, STEVE
STREET ADDRESS 3400 PROSPECT AVE
CITY ST-ZIP NAPLES FL 34104 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY ST-ZIP ☐ Delete

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NAME
STREET ADDRESS
CITY ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST-ZIP ☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY ST-ZIP ☐ Change ☐ Addition

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CITY ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/27/07 239-777-4634