

DOCUMENT # P05000101672 1. Entity Name O'DANIEL MARINE CONSTRUCTION, INC.



08 AUG 13 PM 12: 19

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

Principal Place of Business

1165 SUNSET LANE GULF BREEZE, FL 32563 Mailing Address

1165 SUNSET LANE **GULF BREEZE, FL 32563** 66012600



DO NOT WRITE IN THIS SPACE

04092008 No Chg-P CR2E034 (11/05)

4. FEI Number 20-3064288

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ODANIEL, MICHAEL S SR 1165 SUNSET LANE GULF BREEZE, FL 32563

DO NOT WRITE IN THIS SPACE

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				required when reinstating)	DATE	
	E NOWIII FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Finance Trust Fund Contribution.	cing []	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	CTORS			<u>-</u>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ODANIEL, CHARLES B 1165 SUNSET LANE GULF BREEZE, FL 32563			08	600134589916 08/19/0801008005 **158.75	
IITLE NAME STREET ADDRESS CITY-ST-ZIP	VS ODANIEL, MICHAEL S SR 1165 SUNSET LANE GULF BREEZE, FL 32563					
TITLE NAME STREET ADDRESS CHY-ST-ZIP	VT ODANIEL, MICHAEL S JR 1185 SUNSET LANE GULF BREEZE, FL 32563		DO NOT WRITE IN THIS SPACE			
NAME STREET ADDRESS CITY-ST-ZIP	V CARR, ROBERT A 6385 WYNDOTTE RD LOT B PENSACOLA, FL 32526					
NAME STREET ADDRESS CITY+ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	B 8/13/08					
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 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 charged, or on an attachingst with an address, with all other like empowered.						