

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2007 8:00 am
Secretary of State

04-18-2007 90195 049 ***150.00

DOCUMENT # P06000110831



1. Entity Name
AAA DOCKS, INC.

Principal Place of Business
162 JEFFERSON AVENUE
ORANGE PARK, FL 32065

Mailing Address
162 JEFFERSON AVENUE
ORANGE PARK, FL 32065

40068452



2. Principal Place of Business - No P.O. Box #
162 Jefferson Ave.
Suite, Apt. #, etc.

3. Mailing Address
162 Jefferson Ave.
Suite, Apt. #, etc.

04152007 Chg-P CR2E034 (12/06)

City & State
Orange Park, FL
Zip 32065 Country Clay

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Orange Park, FL
Zip 32065 Country Clay

4. FEI Number
20-5436165
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

SHEFFIELD, JOHN W IV
162 JEFFERSON AVENUE
ORANGE PARK, FL 32065

7. Name and Address of New Registered Agent

Name
Sheffield, John W IV
Street Address (P.O. Box Numbers Not Acceptable)
162 Jefferson Ave.
City Orange Park FL Zip Code 32065

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 John W. Sheffield IV

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4-15-07

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	SHEFFIELD, JOHN W IV	
STREET ADDRESS	162 JEFFERSON AVENUE	
CITY-ST-ZIP	ORANGE PARK, FL 32065	
TITLE	VP	<input type="checkbox"/> Delete
NAME	SHEFFIELD, NICHOLAS S	
STREET ADDRESS	162 JEFFERSON AVENUE	
CITY-ST-ZIP	ORANGE PARK, FL 32065	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: John W. Sheffield IV

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-15-07 904-298-2311

Date

Daytime Phone #