

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Mar 23 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P11057** (7)  
1. Corporation Name  
**AMERICAN MARITIME COMPANY**

Principal Place of Business <b>6001 CHATHAM CTR. STE 350 P. O. BOX 2253 SAVANNAH GA 31402</b>	Mailing Address <b>6001 CHATHAM CTR. STE 350 P. O. BOX 2253 SAVANNAH GA 31402</b>
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified <b>08/07/1986</b>	
4. FEI Number <b>58-1483576</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business		2a. Mailing Address	
21		26	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
22		27	
City & State		City & State	
23		28	
Zip	Country	Zip	Country
24		29	
25		30	

9. Name and Address of Current Registered Agent <b>BURCH, KEN 1921 HECKSCHER DRIVE JACKSONVILLE FL 32228</b>		10. Name and Address of New Registered Agent	
		81	Name
		82	Street Address (P.O. Box Number is Not Acceptable) <b>5051 Propeller Drive</b>
		83	
		84	City <b>Jacksonville</b> FL 85 Zip Code <b>32206</b>

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CEO	1.1 TITLE	
NAME	PEEPLES, FRANK K.	1.2 NAME	
STREET ADDRESS	SYLVAN ISLAND	1.3 STREET ADDRESS	
CITY - ST - ZIP	SAVANNAH GA	1.4 CITY - ST - ZIP	
TITLE	V	2.1 TITLE	
NAME	PEEPLES, ELIZABETH C.	2.2 NAME	
STREET ADDRESS	SYLVAN ISLAND	2.3 STREET ADDRESS	
CITY - ST - ZIP	SAVANNAH GA	2.4 CITY - ST - ZIP	
TITLE	T	3.1 TITLE	
NAME	BENTON, JOHN R., JR.	3.2 NAME	
STREET ADDRESS	6001 CHATHAM CTR, #350	3.3 STREET ADDRESS	
CITY - ST - ZIP	SAVANNAH GA	3.4 CITY - ST - ZIP	
TITLE	S	4.1 TITLE	
NAME	STROUSE, DEBORAH M. ASST	4.2 NAME	
STREET ADDRESS	6001 CHATHAM CTR, #350	4.3 STREET ADDRESS	
CITY - ST - ZIP	SAVANNAH GA	4.4 CITY - ST - ZIP	
TITLE	P	5.1 TITLE	
NAME	MAYFIELD, E. GAY	5.2 NAME	
STREET ADDRESS	6001 CHATHAM CTR, #350	5.3 STREET ADDRESS	
CITY - ST - ZIP	SAVANNAH GA	5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:  **Debra M. Strouse** 3/17/98 (912) 236-1865

CR2E034 (10/97)