

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 29, 1999 8:00 am
Secretary of State

04-29-1999 90041 039 ***150.00

DOCUMENT # P12757

1. Corporation Name

HVIDE MARINE TOWING, INC.

Principal Place of Business

1305 SHORELINE DR. (33605)
P.O. BOX 5797
TAMPA FL 33675

Mailing Address

GENE DOUGLAS ROBERT B. LAMM
2200 ELLER DRIVE
FT LAUDERDALE FL 33316
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/02/1987

4. FEI Number

59-2754468

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year intangible
Personal Property Tax.

☐

Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name

ROBERT B. LAMM

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

2200 ELLER DRIVE

83

P.O. BOX 13038

84 City

FORT LAUDERDALE

FL

85 Zip Code

33316

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

(NOT Registered Agent signature required when reinstating)

DATE

4/22/99

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME PCEO
HVIDE, J E
STREET ADDRESS 2200 ELLER DRIVE
CITY-ST-ZIP FT LAUDERDALE FL 33316

TITLE ☐ DELETE

NAME EVPC
BLANKLEY, JOHN H
STREET ADDRESS 2200 ELLER DRIVE
CITY-ST-ZIP FT LAUDERDALE FL 33316

TITLE ☐ DELETE

NAME EVP
KIMBRELL, JAMES S.
STREET ADDRESS 1305 SHORELINE DR.
CITY-ST-ZIP TAMPA FL

TITLE ☐ DELETE

NAME EVPO
SWEENEY, EUGENE F
STREET ADDRESS 2200 ELLER DRIVE
CITY-ST-ZIP FT LAUDERDALE FL 33316

TITLE ☐ DELETE

NAME EVP
BRANTNER, JAMES C.
STREET ADDRESS 1305 SHORELINE DR
CITY-ST-ZIP TAMPA FL

TITLE ☒ DELETE

NAME ~~VPTS~~
~~STRONG, CHRISTOPHER D~~
STREET ADDRESS ~~2200 ELLER DRIVE~~
CITY-ST-ZIP ~~FT LAUDERDALE FL 33316~~

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

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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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/22/99 954-4200 X800

CR2E034 (1/98)

05/5201