

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

95 FEB 17 AM 10:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P14324

1. Corporation Name

FERNANDINA MARINE CONSTRUCTION MANAGEMENT INC.

Principal Place of Business

Mailing Address

501 NORTH 3RD STREET
FERNANDINA BEACH, FL 32034

SAME

500001410345
-02/20/95--01052--010
*****400.00 *****200.00

DO NOT WRITE IN THIS SPACE.

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

3. Date Incorporated or Qualified	3a. Date of Last Report
5/5/87	1/27/94
4. FEI Number	Applied For Not Applicable
06-1184993	
5. Certificate of Status Desired	\$0.75 Additional Fee Required
☐	
6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
☐	
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes	☒ Yes ☐ No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 S. PINE HLAND RD
PLANTATION, FL 33324

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
FL	85 Zip Code

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 of appointment

DATE Registered Agent signature required when terminating

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DIRECTOR	1.1 TITLE	☐ Change ☐ Addition
NAME	VORSTER, MAARTEN P.	1.2 NAME	
STREET ADDRESS	WESTERLAAN 10	1.3 STREET ADDRESS	
CITY - ST - ZIP	3016 CK ROTTERDAM NL	1.4 CITY - ST - ZIP	
TITLE	DIRECTOR, VICE PRESIDENT	2.1 TITLE	☐ Change ☐ Addition
NAME	CHIECO, MICHAEL G.	2.2 NAME	
STREET ADDRESS	46 SOUTHFIELD AVE	2.3 STREET ADDRESS	
CITY - ST - ZIP	STAMFORD CT	2.4 CITY - ST - ZIP	
TITLE	VICE PRESIDENT, SECRETARY, MANAGER	3.1 TITLE	☐ Change ☐ Addition
NAME	SCHWEE, VALDEMAR	3.2 NAME	
STREET ADDRESS	501 NORTH 3RD STREET	3.3 STREET ADDRESS	
CITY - ST - ZIP	FERNANDINA BEACH, FL 32034	3.4 CITY - ST - ZIP	
TITLE	PRESIDENT	4.1 TITLE	☐ Change ☐ Addition
NAME	STUBBS, WAYNE D.	4.2 NAME	
STREET ADDRESS	501 NORTH 3RD STREET	4.3 STREET ADDRESS	
CITY - ST - ZIP	FERNANDINA BEACH, FL 32034	4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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 its 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:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Valdemar Schwie, VP. 2/19/95 (904) 461-0753