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

STREET ADDRESS CITY-ST-ZIP

SIGNATURE: X

FILED Mar 23 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P15759 (4) RADCLIFF/ECONOMY MARINE SERVICES, INC. Principal Place of Business Mailing Address 5 SOUTH WATER ST. EXTENSION 5 SOUTH WATHER ST. EXTENSION P.O. BOX 3064 P.O. BOX 3064 MOBILE AL 36652 MOBILE AL 36852 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/31/1987 2a. Mailing Address 4 FFI Number 2. Principal Place of Business Applied For 63-0956628 21 28 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 区 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zφ 8. This corporation owes or has paid the current year Intangible ☐ Yes 29 30 Personal Property Tax due June 30. 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD 62 Street Address (P.O. Box Number is Not Acceptable) **PLANTATION FL 33324** 83 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 nanxi of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ☐ DELETE Addition TITLE 1.1 TITLE Change RADCLIFF, B. GREER 1.2 NAME NAME **5 SOUTH WATER ST. EXT** STREET ADDRESS 1.3 STREET ADDRESS MOBILE AL 1.4 CITY-ST-ZIP CITY-ST-2IP DELETE Change Addition 2.1 TITLE TITLE SCHEFFEL, RICHARD C NAME 2.2 NAME **5 SOUTH WATER ST. EXT** STREET ADDRESS 2.3 STREFT ADDRESS MOBILE AL 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition TITLE 3.1 TITLE Change BARTON, JAMES F. NAME 32 NAME 5 SOUTH WATER ST. STREET ADDRESS 3.3 STREET ADDRESS MOBILE AL CITY-S1-ZIP 3.4. CITY - ST - ZIP Addition DELETE TITLE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME NAME

6.3 STREET ADDRESS

3-16-98

6.4 CITY - ST - ZIP 14. Thereby 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 eath; 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.