## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**FILED** Aug 27 1997 8:00am Secretary of State

	UMENT # ation Name DLINA SHIPPING		C.	(7)							
Principal (	Place of Business		Mailing A	ddrocc				!		DIDII UIDII UIDII	
Principal Place of Business Mailing Address P.O. BOX 70988 P.O. BOX 70988 CHARS. SO. CAROLINA 29415 CHARS. SO. CAROLINA 29415											
ı								DO NOT WRITE			
								3. Date Incorporated or Qualified	1	te of Last R	epo <b>rt</b>
9 Dringin	al Place of Business		2a. Mailing Address					01/03/1990 4. FEI Number	03/	04/1996	
2. Philop 21	al Piace of Business		26			57-0901249	Applied For Not Applicable				
	Sulte, Apt. #, etc.			Suite, Apt. #, etc.						\$8.75	
22			27					5. Certificate of Status Desired		Fee Re	
City & State			City & State					6. Election Campaign Financing		\$5.00	May Be
23			28				Trust Fund Contribution		Added t		
Zip		Country	Zip		Cou	ıntry		8. This corporation owes or has pa	N.	4 · -	1
24	25	Address of Current	29		30	г—		Personal Property Tax due June  10. Name and Address of New Re	7.7		No
	BANJO, RICHARD	Aggress of Current	registered A	gent		81	Name	10. Name and Address of New He	distains 1	Agent	
		AD SUITE 423									
9951 ATLANTIC BLVD., SUITE 423 JACKSONVILLE FL 32225						82	Street Add	dress (P.O. Box Number is Not Acceptab	ile)		
,	MONOCHUEL IE	OLLEV				83			_		
						Ш		3111			
						84	City		FL	85 Zip (	Code
11. Pyrsu	ant to the provisions o	1 Sections 607.0502	and 607.1508	B, Florida Statu	ites, the at	bove	e-named co	rporation submits this statement for the p	urpose of	changing it	registered
office agent	or registered agent, o I am <b>ja</b> milia <b>j</b> with, <b>p</b> h	r both, in the State of d_accept the obligati	Florida, Suc ons of, Sectio	n change was on 607.0505, Fi	authorized torida Stat	a by lutes	the corpora 3.	ation's board of directors. I hereby accep	ot the app	ointment as	registered
SIGNATU	17.9	Kents							S	72.197	
	Signature, typed or printe	ed name of Justered agent		ole. (NO		d Age	per evutangla tn	ulred when reinstating)	DATE	O/DEATOD	
12.	-   P	OFFICERS AND	DIRECTORS	K DELETE	13.	TI C	<del></del> 1	ADDITIONS/CHANGES TO OFFICE	ERS ANL	Change	X Addition
NAME	MCCAMMON.	GEORGE A.		AA DECER	1.2 NA		ļ	BARBRO, PAUL L.		Onlingo	N-W. (COULDE)
STREET ADDR	40 EAST DAY						ADDRESS				
CITY-ST-ZIP	SAV. GA	• • • • • • • • • • • • • • • • • • • •						מאט מלא מודע מינות אנו אוני	ח מרי		
TITLE							1-7IP	1810 WATER PLACE, STE	180		
NAME	ST			DELETE	1.4 CF 2.1 TF	TY-S	1-ZIP	1810 WATER PLACE, STE ATLANTIA, GA 30339	180	Change	Addition
STREET ADDRESS 1064 GARDNER ROAD, SUITE 312					1.4 CI	TY-S	1-ZIP		180	Change	Addition
STREET ADDR	MCDONALD, 1 1064 GARDNE		312	DELETE	1.4 CF 2.1 TF 2.2 NA	TLE AME	1-ZIP ADDRESS		180	Change	Addition
STREET ADDR	MCDONALD,		312	DELETE	1.4 CF 2.1 TF 2.2 NA	TLE AME IREET	ADDRESS		2 180		Addition
	MCDONALD, 1 1064 GARDNE		312	☐ DELETE	1.4 CI 2.1 TII 2.2 NA 2.3 SI	ITY-S TLE AME IREST	ADDRESS		180	Change Change	Addition Addition
CITY-ST-ZIP	MCDONALD, 1 1064 GARDNE		312		1.4 CI 2.1 TII 2.2 NA 2.3 SI 2.4 C	ITY-S TLE AME IREET ITY-S TLE	ADDRESS		2 180		
CITY-ST-ZIP TITLE	MCDONALD, 1064 GARDNE CHARS SC		312		1.4 CI 2.1 TII 2.2 NA 2.3 SI 2.4 C 3.1 TII 3.2 NA	ITY-S TLE AME IREET ITY-S TLE AME	ADDRESS		2 180		
CITY-ST-ZIP TITLE NAME STREET ADDR CITY-ST-ZIP	MCDONALD, 1064 GARDNE CHARS SC		312	☐ DELETE	1.4 GI 2.1 TH 2.2 NA 2.3 ST 2. 4 C 3.1 TH 3.2 NA 3.3 ST 3.4. C	TLE AME IREET ITY-S TLE AME IREET	ADDRESS ST - ZIP		2 180	Change	Addition
TITLE NAME STREET ADDR CITY-ST-ZIP TITLE	MCDONALD, 1064 GARDNE CHARS SC		312		1.4 CI 2.1 TII 2.2 NA 2.3 SI 2.4 C 3.1 TII 3.2 NA 3.3 SI 3.4 C 4.1 TI	TLE AME IREET ILE AME IREET ILE AME IREET IREET	ADDRESS ST-ZIP ADDRESS		2 180		
TITLE NAME STREET ADDR CITY-ST-ZIP TITLE NAME	MCDONALD, 1064 GARDNE CHARS SC		312	☐ DELETE	1.4 CI 2.1 TII 22 NA 2.3 ST 2.4 C 3.1 TII 3.2 NA 3.3 ST 3.4 C 4.1 TII 4.2 N	ITY-S TLE AME IREET TLE TLE TREET TREET TREET TLE TLE TLE TLE TLE TLE	ADDRESS ST-ZIP ADDRESS ST-ZIP		2 180	Change	Addition
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CITY-ST-ZIP TITLE NAME STREET ADDR CITY-ST-ZIP TITLE	MCDONALD, 1084 GARDNE CHARS SC  ESS  ESS		312	DELETE  DELETE	1.4 CI 2.1 TII 2.2 NM 2.3 SI 2.4 C 3.1 TII 3.2 NM 3.3 SI 4.4 CI 4.1 TI 5.2 NM 5.3 SI 5.4 CI 6.1 TII 6.2 NA	ITY-S TLE AME IREET TLE AME IREET TLE IMME IREET TY-S TLE AME IREET TY-S TLE AME IREET TY-S TLE	ADDRESS ST-ZIP  ADDRESS ST-ZIP  ADDRESS 1-ZIP  ADDRESS 1-ZIP		2 180	Change Change	Addition  Addition

The national statutes in the information supplied with this nining does not quality 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 array himself with address.