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

**PROFIT CORPORATION** ANNUAL REPORT

1998



ELORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P30191

ALLSOUTH-GULF STEVEDORING COMPANY, INC.

Principal Place of Business 211 NORTH CONCEPTION STREET

TITI F

NAME

STREET ADDRESS

CITY-ST-ZIP

Mailing Address

211 NORTH CONCEPTION STREET

MOBILE AL 36603

## **FILED** Mar 27 1998 8:00am Secretary of State



MOBILE AL 36603 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/18/1990 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 58-2015681 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28  $\Box$ Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD **B2** Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 83 84 City 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 if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 TITLE ☐ Change Addition **ELLIS. J. WILEY** NAME 1.2 NAME 15 DRAYTON STREET STREET ADDRESS 1.3 STREET ADDRESS **SAVANNAH GA** CITY-ST-ZIP 1.4 CITY-ST-ZIP X DELETE TREASURER TITLE 21 TITLE Change X Addition ENNIS, EDWIN L VERNON W. CAWTHON, JR. NAME 2.2 NAME 6002 COMMERCE BLVD. STREET ADDRESS 2.3 STREET ADDRESS 6002 COMMERCE BLVD. **GARDEN CITY GA** CITY-ST-ZIP 2. 4 CITY - ST - ZIP GARDEN CITY. GA. 31408 DELETE TITLE Addition 3.1 TITLE ☐ Change SECRETARY NAME 3.2 NAME CHERYL C. ELTON STREET ADDRESS 3.3 STREET ADDRESS 310 W WHATLEY ST. CITY-ST-ZIP 3.4. CITY-ST-ZIP POOLER GA 31322 TITLE DELETE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change ☐ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 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 suppliemental 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 13 if changed and a address.

6.1 TATLE

6.2 NAME

6.3 STREET ADORESS

DELETE

Change

Addition