## 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** 

## DOCUMENT # P93000012139

1. Corporation Name

## FILED Apr 13, 1999 8:00 am Secretary of State

04-13-1999 90055 045 \*\*\*150.00

NICHOLS	S HI-TECH MARINE, INC.									
Principal Place	e of Business	Mailing Address								-
8200 HWY 22 8200 HWY 22										į
PANAMA CITY FL 32404 PANAMA CITY FL 32404						DO NOT WRITE IN THIS SPACE				- 1
}						3. Date Incorporated or Qualifed				;
						02/17/1993			1	,
Principal Place of Business     2a. Mailing Address			-			4. FEI Number		Ap	plied For	- 1
21		26				59-3168825			t Applicable	- 1
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired		\$8.75		
22		27	City & State					Fee Re		نند
City & Stat	e	⊢ ´	¬ ´			6. Election Campaign Financing  Trust Fund Contribution		\$5.00 Added		!
23     28       Zip   Zip   Zip			Country			8. This corporation owes the currer	t vear Intar		01003	,
24 25 29 29			30			Personal Property Tax.		Yes	□No	
	9. Name and Address of Curre		1441			10. Name and Address of New Re	gistered A	gent		r
				81	Name					
NICHOLS, RUSSEL				82 Street Address (P.O. Box Number is Not Acceptable)				_,		- 1
1	) HWY 22						· · · · · · · · · · · · · · · · · · ·			
PAN	IAMA CITY FL 32404			83						
				84	City		FL	85 Zip	Code	
Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, office or registered agent, or both, in the State of Florida. Such change was auth agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida.					namad a	amoration submits this statement for the ni	ımose of c	enging its	registered	
office or r	registered agent, or both, in the Stat	e of Florida. Such change w	as authorized	d by f	the corpor	ation's board of directors. I hereby accept	the appoint	ment as re	gistered	
agent. I a	ım familiar with, and accept the obliq	gations of, Section 607.0505	, Florida Stat	utes.						
SIGNATURE	Signature, typed or printed name of registered as	and title if applicable	NOTE: Registered	1 Agent	t signature rec	guired when reinstating)	DATE	_		_
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFI	CERS AND	DIRECTO	RS IN 12	66/
TITLE	DP	<del></del>		1.1 TITLE 1.2 NAME				Change	☐ Addition	R2E034 (11/98)
NAME	NICHOLS, RUSSEL									25
STREET ADDRESS	TADORESS 8200 HWY 22		1.3 8	TREET	ADDRESS					ŭ
CITY-ST-ZIP	PANAMA CITY FL			1.4 CITY-ST-ZIP				=		ά
TITLE	DS -	☐ DELET	E 2.1 TI	TLE				Change	Addition	
NAME	AUFDNECAMP, BRAD			2.2 NAME						
STREET ADDRESS	/		2.3 \$	TREET	ADDRESS					
CITY-ST-ZIP	PANAMA CITY-FL	☐ DELET			T-ZIP			Change	Addition	
TITLE		☐ DELET								
NAME			3.2 N		***********				ĺ	
STREET ADDRESS					ADDRESS					
TITLE		☐ DELET		<u>ЖҮ-5</u>	1-239			Change	Addition	
NAME		<u></u>	4.21						_	
STREET ADDRESS			1		ADDRESS					
CITY-ST-ZIP			43S	TRFFT					1	
TITLE					- 1				ĺ	
NAME		☐ DELET	4.4 C	ITY-S <u>T</u>	- 1			☐ Change	Addition	
i		☐ DELET	4.4 C	ITY-S <u>T</u> ITLE	- 1			Change	Addition	
STREET ADDRESS		□ DELET	4.4 C E 5.1 Ti 5.2 N	ity-s <u>t</u> Itle Iame	- 1			Change	☐ Addition	
CITY-ST-ZIP		☐ DELET	4.4 C E 5.1 Ti 5.2 N 5.3 S	ity-s <u>t</u> Itle Iame	ADDRESS			☐ Change		
i		☐ DELET	4.4 C E 5.1 Ti 5.2 N 5.3 S 5.4 C	ITY-ST ITLE IAME TREET ITY-ST	ADDRESS			☐ Change	☐ Addition	
CITY-ST-ZIP			4.4 C E 5.1 Ti 5.2 N 5.3 S 5.4 C	ITY-ST ITLE IAME TREET ITY-ST ITLE	ADDRESS					
CITY-ST-ZIP			44 C E 5.1 Ti 52 N 5.3 S 5.4 C E 6.1 Ti 62 N 6.3 S	ITY-ST ITLE IAME TREET ITY-ST ITLE IAME	ADDRESS ADDRESS ADDRESS					

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 of 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 or an attachment with an address, with all other like empowered.