

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Tallahassee, Florida
Date of Filing: 05/01/1994

DOCUMENT # P93000045938 (6)

GULFSIDE DOCKS & LIFTS, INC.

05 MAY 11 1994 25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

1323 DERBYSHIRE CT #A-202
NAPLES FL 33999

Mailing Address

1323 DERBYSHIRE CT #A-202
NAPLES FL 33999

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified
06/22/1993

3a. Date of Last Report
05/01/1994

4. FET Number
65-0413605

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 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 5-190.032,
Florida Statutes. ☒ Yes ☐ No

2. Principal Place of Business

21. State Apt # etc.
22. City & State

2a. Mailing Address

25. State Apt # etc.
27. City & State

24. Zip Country 25. Country 29. Zip Country 30. Country

9. Name and Address of Current Registered Agent

WIERBACK, EDWARD J JR
1323 DERBYSHIRE CT #A-202
NAPLES FL 33999

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 607.07(2) and 607.15(8), 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 607.07(2), Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

1. NAME
WIERBACK, EDWARD J JR
2. STREET ADDRESS
1323 DERBYSHIRE CT #A-202
3. CITY, STATE, ZIP
NAPLES FL 33999

4. NAME

5. STREET ADDRESS

6. CITY, STATE, ZIP

7. NAME

8. STREET ADDRESS

9. CITY, STATE, ZIP

10. NAME

11. STREET ADDRESS

12. CITY, STATE, ZIP

13. NAME

14. STREET ADDRESS

15. CITY, STATE, ZIP

16. NAME

17. STREET ADDRESS

18. CITY, STATE, ZIP

19. NAME

20. STREET ADDRESS

21. CITY, STATE, ZIP

22. NAME

23. STREET ADDRESS

24. CITY, STATE, ZIP

25. NAME

26. STREET ADDRESS

27. CITY, STATE, ZIP

28. NAME

29. STREET ADDRESS

30. CITY, STATE, ZIP

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

1. NAME ☐ Change ☐ Addition

2. NAME ☐ Change ☐ Addition

3. NAME ☐ Change ☐ Addition

4. NAME ☐ Change ☐ Addition

5. NAME ☐ Change ☐ Addition

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26. NAME ☐ Change ☐ Addition

27. NAME ☐ Change ☐ Addition

28. NAME ☐ Change ☐ Addition

29. NAME ☐ Change ☐ Addition

30. NAME ☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 5.190.03(2)(b), Florida Statutes. I further certify that the information included 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 liquidator empowered to make this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report.

SIGNATURE:

Edward J. Wierback Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR