

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P93000060230 (8)**

1. Corporation Name

TERHAAR & CRONLEY MARINE CONSTRUCTION, INC.



Principal Place of Business

**3840 HOPKINS ST.
PENSACOLA FL 32505**

Mailing Address

**3840 HOPKINS ST.
PENSACOLA FL 32505**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

g. Name and Address of Current Registered Agent

**TERHAAR, ANTHONY L
3840 HOPKINS ST.
PENSACOLA FL 32505**

3. Date Incorporated or Qualified

08/23/1993

3a. Date of Last Report

01/30/1995

4. FEI Number

59-3199603

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 s. 199.032,
Florida Statutes ☐ Yes ☐ No

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 607.0502 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 type for public review of registered agent and director (if applicable)

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

1 NAME ☐ DELETE

**D
TERHAAR, ANTHONY L
3840 HOPKINS ST
PENSACOLA FL 32505**

2 NAME ☐ DELETE

**D
CRONLEY, JAMES D
3840 HOPKINS ST
PENSACOLA FL 32505**

3 NAME ☐ DELETE

4 NAME ☐ DELETE

5 NAME ☐ DELETE

6 NAME ☐ DELETE

7 NAME ☐ DELETE

8 NAME ☐ DELETE

9 NAME ☐ DELETE

10 NAME ☐ DELETE

11 NAME ☐ DELETE

12 NAME ☐ DELETE

13 NAME ☐ DELETE

14 NAME ☐ DELETE

15 NAME ☐ DELETE

16 NAME ☐ DELETE

17 NAME ☐ DELETE

18 NAME ☐ DELETE

19 NAME ☐ DELETE

20 NAME ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 1 TITLE ☐ Change ☐ Addition

2 NAME

3 STREET ADDRESS

4 CITY - ST - ZIP

5 1 TITLE ☐ Change ☐ Addition

2 NAME

3 STREET ADDRESS

4 CITY - ST - ZIP

5 1 TITLE ☐ Change ☐ Addition

2 NAME

3 STREET ADDRESS

4 CITY - ST - ZIP

5 1 TITLE ☐ Change ☐ Addition

2 NAME

3 STREET ADDRESS

4 CITY - ST - ZIP

5 1 TITLE ☐ Change ☐ Addition

2 NAME

3 STREET ADDRESS

4 CITY - ST - ZIP

5 1 TITLE ☐ Change ☐ Addition

2 NAME

3 STREET ADDRESS

4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 or changes in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/16/96 904 433 7007

CR2E034 (12/95)