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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARIMENT OF STATI

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000083879 (5)

A D T DOCK & FLOATATION ENTERPRISES, INC.

Principal Plac HIGHWAY 51 STEINHATCHE		Mailing Address P. O. BOX 688 STEINHATCHEE FL 32359-08	688		
,				3. Date Incorporated or Qualified 12/01/1993	3a. Date of Last Report 02/07/1996
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number 59-3218255	Applied for Not Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	Θ	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for it	
24	25		10		Yes No
	9. Name and Address of Curren	t Registered Agent	81 Name	10. Name and Address of New Reg	gistered Agent
688	WERS, GREGORY R HWY. 51 HNHATCHEE FL 32359		82 Street Add8384 City	iress (P.O. Box Number is Not Acceptab	oel Zin Codo
11. Pursuant office or ragent. f a	to the provisions of Sections 607.05.0, registored agent or both, in the State im familiar with, and account the obligation of the section of the sec	<i></i>	s, the above-named contithorized by the corporated a Statutes. R. Dowers Registerice Agent segrature requirements.	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of changing its registered of the appointment as registered
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	PD	DELETE	1.1 TILLE		Change Addition
NAME STREET ADDRESS CITY-ST-ZIP	DOWERS, GREGORY R 688 HWY. 51 STEINHATCHEE FL 32359		1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		
TITLE NAME	STD Dowers, Dereith	☐ DELETE	2.1 TITLE 2.2 NAME		Change Addition
STREET ADDRESS	688 HWY 51		2.3 STREET ADDRESS		
CITY-ST-ZIP	STEINHATCHEE FL		2 4 CITY - ST - 7IP		
TITLE		DELF IF	3 1 1IILE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CHY-SI-7IP		
TITLE		□ DELETE	4.1 TILE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 SURFET ADDRESS		j .

14. I do 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 offect as if made under eath; 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 attachment with an address.

5.1 100 F

6.2 NAME

5.3 STREET ADDRESS

5.4 CITY - \$1 - 24

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TIFLE

TITLE

NAME

Gregory R

DEFETE

🔲 DELFTË

3-13-97

352-498-7721

Change

Change

Addition

Addition

FILED

Mar 17 1997 8:00am

Secretary of State