

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P94000043999 (9)**
1. Corporation Name

DANIELS MARINE CONSTRUCTION, INC.

Principal Place of Business

**870 64TH ST. OCEAN
MARATHON FL 33050**

Mailing Address

**PO BOX 50010
MARATHON FL 33050
US**



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 **P.O. Box 501351**

Suite, Apt. #, etc.

27 City & State

28 **Marathon, FL**

Zip

29 **33050**

Country

30 **Monroe**

3. Date Incorporated or Qualified

06/08/1994

3a. Date of Last Report

03/23/1995

4. FEI Number

65-0497992

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

9. Name and Address of Current Registered Agent

**DANIELS, CHARLOTTE E
7987 SHARK DR
MARATHON FL 33050**

10. Name and Address of New Registered Agent

81 Name

Daniels, Steve R.

82 Street Address (P.O. Box Number is Not Acceptable)

870 64th Street Ocean

83

84 City

Marathon

FL

85 Zip Code

33050

11. Pursuant to the provisions of Sections 607.0502 and 607.1308, 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 in full below:

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

(DATE)

06/24/96

12. OFFICERS AND DIRECTORS

TITLE NAME ☐ DELETE

**PD
DANIELS, STEVE R
870 64TH ST, OCEAN
MARATHON FL 33050**

TITLE NAME ☐ DELETE

**VD
DANIELS, TIMOTHY R
P.O. BOX 500010 N/A
MARATHON FL 33050**

TITLE NAME ☐ DELETE

**SD
DANIELS, CHARLOTTE E
7987 SHARK DR
MARATHON FL 33050**

TITLE NAME ☐ DELETE

**STREET ADDRESS
CITY - ST - ZIP**

TITLE NAME ☐ DELETE

**STREET ADDRESS
CITY - ST - ZIP**

TITLE NAME ☐ DELETE

**STREET ADDRESS
CITY - ST - ZIP**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

VP + Director

Black, John

P.O. Box 501351 N/A

Marathon, FL 33050

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Addition

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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

06/24/96

(305) 664-1992

CR2E034 (3/96)