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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000048369 (0)

## FILED May 06 1998 8:00am Secretary of State

DESTIN	N MARINE, INC.					
Principal Plac	ce of Business	Mailing Address				#1001 1010# (11f0 0)#10 10#1 f0 01
821 HWY 98 EAST 621 HWY 98 EAST						
DESTIN FL 32541 DESTIN FL 32541						
					DO NOT WRITE IN TH  3. Date Incorporated or Qualified	HIS SPACE
					06/24/1994	
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21 2		26	<del>-</del>		59-3254352	Not Applicable
Suite, Apt. #, etc. Suite		Suite, Apt. #, etc.	ilte, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
		27			Certificate of Status Desired	Fee Required
City & State		City & State	<u>├</u> ``		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28	Count		Trust Fund Contribution	Added to Fees
24	25	Ζιρ <b>29</b>	30	ry	6. This corporation owes or has paid the Personal Property Tax due June 30.	current year Intangible  X Yes  No
241	9. Name and Address of Cur		1301		10. Name and Address of New Register	
AD	COCK, LEONARD M	······································	8	1 Name		
621 HWY 98 EAST			8	Otroni Ardel	ress (P.O. Box Number is Not Acceptable)	·
DESTIN FL 32541			6,	Street Auki	ress (F.O. Box Number is Not Acceptable)	
			8:	3		
			B-	4 City		- 85 Zip Code
				1	F	•L   `   `
11. Pursuant office or r	to the provisions of Sections 607.0 registered agent, or both, in the St.	0502 and 607.1508, Florida <b>Sta</b> tut	es, the abor	ve-named corp	poration submits this statement for the purposition's board of directors. I hereby accept the	e of changing its registered
agent. I a	im familiar with, and accept the ob	ligations of Section 607.0505, Fi	orida Statute	95.	monts docard or directors, thiereby accept the	appointment as registered
SIGNATURE						
12,	Signature, typed or printed name of registered	AND DIRECTORS (NOT	F Registered A	gent signature requi	red when reinstating) DA1 ADDITIONS/CHANGES TO OFFICERS A	)
TITLE	P	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS	Change Addition
NAME	ADCOCK, LEONARD	<del></del>	1.2 NAME			
STREET ADDRESS	572 POCAHONTAS DR.			ET ADDRESS		
CITY-ST-ZIP	FT. WALTON BEACH FL		1.4 CITY-			
TITLE	18	☐ DELETE	2.1 TITLE			☐ Change ☐ Addition
NAME	ADCOCK, JEAN E.		2.2 NAME			
STREET ADDRESS	572 POCAHONTAS DR.		2.3 STREE	ET ADDRESS		
CITY-ST-ZIP	FT. WALTON BEACH FL		2.4 CITY	- ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE			Change Addition
NAME			3.2 NAME			
STREET ADDRESS			1	T ADDRESS		
CITY-ST-ZIP TITLE		☐ DELET <b>E</b>	3 4. CITY			Change Laddu:
NAME		C Detter	4.1 TITLE			Change Addition
STREET ADDRESS			4. 2 NAM	T ADDRESS		
CITY-ST-ZIP			4.4 CITY -			
TITLE		DELETE	5.1 TITLE			☐ Change ☐ Addition
NAME		<del></del>	5.2 NAME			
STREET ADDRESS				1 ADDRESS		
CITY-ST-ZIP			5.4 CITY -			
TITLE		DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREE	T ADDRESS		
CITY-ST-ZIP			6.4 CITY-	ST - ZIP		

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 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.