Florida Department of State Division of Corporations

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: BARNETT, BOLT, KIRKWOOD & LONG

Account Number : 672731881155 Phone

: (813)253-2020

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: (813)251-6711

REGISTERED AGENT CHANGE

D & R MARINE, OF CRYSTAL RIVER, INC.

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	of change is submitted for a co	1302, 617.0302, 607.1308, or 617.130 rporation organized under the laws of registered office or registered agent,	the State of		
of Florida.	in order to change as	registered office or registered agent,	or doin, in me i ·	Siate	
	the corporation; D & R Marine	e, of Crystal River, Inc.			
	l office address: 4531 N. Willia			_	0
-	er, FL 34428			- 3	PINISION
				2003 OCT	_오
3. The mailing	address (if different): same			1/2	_ ⊊
				~ - -	- C
4. Date of inco	rporation/qualification:9/6/5	Document number:	P94000066536	_ =	Ē.
	id street address of the current surment of State: Claire A. Titus	registered agent and registered office o	n file with the	<u> </u>	3 S
	849 Kings Bay Drive				
	Crystal River, FL 34423		<u> </u>		
6. The name a changed):	nd street address of the new t	registered agent (if changed) and /or	registered office	(if	
	601 Bayshore Boulevard, Ste.	700			
	(P.O. Box or pa	ryonal mailbox NOT acceptable)			
	Tampa, FL 33606		 -		
The street addragent, as chang	ess of its registered office and ed will be identical.	the street address of the business offi	ce of its register	red	
Such charge was	as authorized by resolution du board, or the corporation h	dy adopted by its board of directors or as been notified in writing of the chan	by an officer sege.	0	
yer	(Paul D. Loughridge			
	(, Chalirman or vice chamman of the board)	(Printed or typed name and hits	•		
I hereby accep I further agree performance o registered agei office address,		d agent and agree to act in this capac of all statutes relative to the proper a with and accept the obligation of my ug filed merely to reflect a change in t boration has been notified in writing o	ity. Ind complete position as he registered f this change.		
	ignature of Registered Agent)	9/17/03			
If signing on both		, ((Date)			
	Typed or Printed Name)	(Capacity)			

MAXE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO: Division of Corporations, P.O. Box 6327, Tallahasses, FL 32314

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