

**FILED**  
**Feb 22, 1999 8:00 am**  
**Secretary of State**

02-22-1999 90129 032 \*\*\*150.00

<b>PROFIT CORPORATION ANNUAL REPORT 1999</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P95000053774**

1. Corporation Name  
**HOG KEY MARINE, INC.**

Principal Place of Business 1100 OVERSEAS HIGHWAY MARATHON FL 33050	Mailing Address 1100 OVERSEAS HIGHWAY MARATHON FL 33050
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address	3. Date Incorporated or Qualified 07/05/1995	4. FEI Number 65-0596127	Applied For Not Applicable
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	27 City & State	28 City & State	29 Zip	30 Country
22 City & State	27 City & State	28 City & State	29 Zip	30 Country	
23 Zip	24 Country	25 Zip	26 Country	27 Zip	28 Country
24 Country	25 Zip	26 Country	27 Zip	28 Country	29 Zip

9. Name and Address of Current Registered Agent GREENMAN, FRANKLIN D 5800 OVERSEAS HIGHWAY SUITE 40 MARATHON FL 33050		10. Name and Address of New Registered Agent	
81 Name	82 Street Address (P.O. Box Number is Not Acceptable)	83 City	84 Zip Code
Cale B. Nelson, Jr.	1100 Overseas Highway	Marathon	FL 33050

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 Cale B. Nelson, Jr. Cale B. Nelson, Jr. 3-17-99  
Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when reissuing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD NELSON, CALE	1.1 TITLE	
NAME	1100 OVERSEAS HIGHWAY	1.2 NAME	
STREET ADDRESS	MARATHON FL 33050	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	SD GIFFORD, SHERRY	2.1 TITLE	
NAME	1100 OVERSEAS HWY.	2.2 NAME	
STREET ADDRESS	MARATHON FL 33050	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET 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, with all other like empowered.

SIGNATURE: Sherry Gifford Sherry Gifford  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/6/99

305-743-3960

CR2E034 (1/98)