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PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P95000084220 (9)**

1. Corporation Name

THE DOCKING BAY, INC.

Principal Place of Business	Mailing Address
POST OFFICE BOX 61662 JACKSONVILLE FL 32236-1662	POST OFFICE BOX 61662 JACKSONVILLE FL 32236-1662

2. Principal Place of Business	2a. Mailing Address
21 4338 WINDERGATE CT.	26 4338 WINDERGATE CT
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 JACKSONVILLE, FL	28 JACKSONVILLE, FL
24 Zip 32257	29 Zip 32257
25 Country DUVAL	30 Country DUVAL

3. Date Incorporated or Qualified: **11/02/1995**

3a. Date of Last Report:

4. FEI Number: 59-3348305 ☐ 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

MEADE, CECIL D
10201 W. BEAVER STREET
NO 285
JACKSONVILLE FL 32220

10. Name and Address of New Registered Agent

81 Name: BARRY L. BRICK
82 Street Address (P.O. Box Number is Not Acceptable): 4357 SAN JOSE BLVD.
83
84 City: JACKSONVILLE FL 85 Zip Code: 32207

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: Barry L. Brick — BARRY L BRICK — 1/28/96
(Signature of New Registered Agent, if changing) (Printed or Typed Name of New Registered Agent) (Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	D NEELY, GREGORY H 6710 COLLINS ROAD STE 2514 JACKSONVILLE FL 32244 ☐ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	PRESIDENT ☒ Change ☐ Addition NEELY, GREGORY H 4338 WINDERGATE CT JACKSONVILLE, FL 32257
21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	D MEADE, CECIL D 10201 W. BEAVER ST. STE 285 JACKSONVILLE FL 32220 ☒ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	D ☐ Change ☒ Addition JULIA A. EMMONS 2229 MARCIA CT ORANGE PARK, FL 32073
31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	D STAPLETON, CHARLES L 6710 COLLINS ROAD STE 2514 JACKSONVILLE FL 32244 ☐ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	D ☒ Change ☐ Addition STAPLETON, CHARLES L 4338 WINDERGATE CT JACKSONVILLE, FL 32257
41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	D BRICK, BARRY L 4357 SAN JOSE JACKSONVILLE FL 32207 ☐ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	VICE PRESIDENT ☒ Change ☐ Addition BRICK, BARRY L 4357 SAN JOSE BLVD JACKSONVILLE, FL 32207
51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	D GARRETT, A L 4357 SAN JOSE JACKSONVILLE FL 32207 ☐ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	☐ Change ☐ Addition
61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	D LACY, ROBERT J 10201 W. BEAVER ST. STE 285 JACKSONVILLE FL 32200 ☒ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	D ☐ Change ☒ Addition LEONARD EMMONS 2229 MARCIA CT ORANGE PARK, FL 32073

CR2E034 (12/95)

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)(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.

SIGNATURE: Gregory H. Neely — 1/27/96 — (904) 268-4520
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

GREGORY H. NEELY