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

FILED
Apr 10 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998

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

DOCUMENT # P95000084220

1. Corporation Name
THE DOCKING BAY, INC.

Principal Place of Business / Mailing Address
421 WEST CHURCH STREET
SUITE 521
JACKSONVILLE, FL 32202

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

2. Principal Place of Business	2a. Mailing Address
21 421 WEST CHURCH ST	26 421 WEST CHURCH ST
Suite, Apt #, etc. 22 SUITE 521	Suite, Apt #, etc. 27 SUITE 521
City & State 23 JACKSONVILLE, FL	City & State 28 JACKSONVILLE, FL
Zip 24 38202 Country 25 DUVAL	Zip 29 32202 Country 30 DUVAL

4. FEI Number 59-334 8305 — 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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
BARRY BRICK
4357 San Jose Blvd
JACKSONVILLE FL 32207

10. Name and Address of New Registered Agent
81 Name Leonard L. Emmons
82 Street Address (P.O. Box Number is Not Acceptable) 1211 Crestfield Rd
83
84 City JACKSONVILLE FL 85 Zip Code 32205

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 Leonard L. Emmons Leonard L. Emmons 4/5/98
(NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	PRESIDENT	☐ DELETE P
NAME	GREGORY H NEELY	
STREET ADDRESS	1238 RIVER BANK CT	
CITY-ST-ZIP	JACKSONVILLE FL 32207	
TITLE	VICE PRESIDENT	☐ DELETE ✓
NAME	Leonard Emmons	
STREET ADDRESS	1211 Crestfield Rd	
CITY-ST-ZIP	JACKSONVILLE FL 32205	
TITLE	Secretary	☐ DELETE S
NAME	Julia Emmons	
STREET ADDRESS	1211 Crestfield Rd	
CITY-ST-ZIP	JACKSONVILLE FL 32205	
TITLE	TREASURER	☐ DELETE T
NAME	BARRY BRICK	
STREET ADDRESS	4357 San Jose Blvd	
CITY-ST-ZIP	JACKSONVILLE FL 32207	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	CHARLES STAPELTON	☑ DELETE
NAME	4338 WINDERGATE CT	
STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL 32257	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	100002486701	☐ Change ☐ Addition
5.2 NAME	-04/13/98--01099--014	
5.3 STREET ADDRESS	***150.00	
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

PE 4.10

CR2E034 (10/97)

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.

SIGNATURE: Julia A Emmons 4-5-98 358-2002
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #