

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000084768 (7)
1. Corporation Name

RENT RIGHT MARINE, INC.



Principal Place of Business

Mailing Address

4255 PENINSULA POINT
SANFORD FL 32771

4255 PENINSULA POINT
SANFORD FL 32771

3. Date Incorporated or Qualified 11/03/1995
3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc

26 2474 Howland Blvd.
Suite, Apt #, etc

22 City & State

27 City & State

23 Zip

Country

28 Deltona, FL
Zip

Country

24

25

29 32738

30

Volusia

4. FEI Number 59-3354488
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

10. Name and Address of New Registered Agent

WRIGHT, DENNIS E
4255 PENINSULA POINT
SANFORD FL 32771

81 Name Wright Dennis E
82 Street Address (P.O. Box Number is Not Acceptable) 2474 Howland Blvd
83
84 City Deltona FL 85 Zip Code 32738

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

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

11 TITLE President
12 NAME Dennis E. Wright
13 STREET ADDRESS 2474 Howland Blvd
14 CITY - ST - ZIP Deltona, FL 32738

☐ Change ☒ Addition

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

21 TITLE Vice President
22 NAME Karen R. Wright
23 STREET ADDRESS 2474 Howland Blvd
24 CITY - ST - ZIP Deltona, FL 32738

☐ Change ☒ Addition

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

31 TITLE Secretary
32 NAME Karen R. Wright
33 STREET ADDRESS 2474 Howland Blvd
34 CITY - ST - ZIP Deltona, FL 32738

☐ Change ☒ Addition

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

41 TITLE Treasurer
42 NAME Karen R. Wright
43 STREET ADDRESS 2474 Howland Blvd
44 CITY - ST - ZIP Deltona, FL 32738

☐ Change ☒ Addition

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

☐ Change ☐ Addition

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)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Karen R. Wright Karen R. Wright

7/16/96

904-789-0073

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (3/96)