Apr 12, 1999 8:00 am Secretary of State

04-12-1999 90006 009 \*\*\*150.00

COMMUNICATION CONTRACTOR AND ADDRESS OF THE ADDRESS

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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P95000084768

1. Corporation Name

RENT RIGHT MARINE, INC.

Principal Place of Business Mailing Address							i tibilibit ira isiat attit aatit allit dalit kärat isiit atati tahta kijat (sti 1981
4255 PENINSULA POINT 2474 HOWLAND BLVD							
SANFORD FL 3	32771		DELTONA FL 32738				DO NOT WRITE IN THIS SPACE
US						3. Date Incorporated or Qualified	
							11/03/1995
6 District Discret Business Business Address							1 1/03/1993 4. FEI Number Applied For
2. Principal Place of Business 2a. Mailing Address						59-3354488 Not Applicable	
26     Suite Apt # etc.   Suite Apt, #, etc.						39-3334406 Refrigired No. 17 Additional	
						5. Certificate of Status Desired Fee Required	
22 27 City & State City & St			& State	State			6. Election Campaign Financing 5.00 May Be
			i State				Trust Fund Contribution Added to Fees
Zip Country			Zip Country				8 This corporation owes the current year Intangible
— ·			30	¬ '		Personal Property Tax.	
24	9. Name and Address of Curre		l Agent	<u> </u>	T		10. Name and Address of New Registered Agent
	5. Name and Address of Curre	in itogratora	- Agont		81	Name	
Wright, Dennis e							The state of the s
2474 HOWLAND BLVD					82 Street Address (P.O. Box Number is Not Acceptable)		
DELTONA FL 32738					83		
					84	City	FL 85 Zip Code
office or i	registered agent, or both, in the State im familiar with, and accept the obligi	e of Florida. Su ations of, Sect and title if applic	uch change was a tion 607.0505, Flo cable (NOTE	utnorize rida Sta R.(.	tutes.	the corpora	orporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered  #-2-99  puired when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE			DELETE	1.1	TITLE		☐ Change ☐ Addition
NAME	WRIGHT, DENNIS E		1.21	1.2 NAME			
STREET ADDRESS	A THE LOCK AND DIVID			1.3 5	1.3 STREET ADDRESS		,
CITY-ST-ZIP	DELTONA FL		1.4 (	1.4 CITY-ST-ZIP			
TITLE	P		☐ DELETE	2.1 TTLE			☐ Change ☐ Addition
NAME	WRIGHT, KAREN			2.2 NAME		- 1	
STREET ADDRESS			2.3	STREET	ADDRESS		
CITY-ST-ZIP	DELTONA FL	2.		2.4	CITY-S	T-ZIP	
TITLE	ST-		DELETE	3.1 TITLE			Change Addition
NAME	WRIGHT, KAREN	- <del>-</del>		3.2 NAME		[	
STREET ADDRESS	A COLUMN AND DIVE			1		ADDRESS	
CITY-ST-ZIP	DELTONA FL				CITY-S		
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STREET ADDRESS						T ADDRESS	
	'  - ·				CITY-S		
CITY-ST-ZIP TITLE			☐ DELETE	_	ITILE		☐ Change ☐ Addition
					NAME	1	_ · · · · ·
NAME CIDEET ADODESC						ADDRESS	
STREET ADDRESS	}				CITY-S	٠	
CITY-ST-ZIP TITLE			☐ DELETE	_	TITLE	+	☐ Change ☐ Addition
ince .	I						_ · · ·
NAME	İ			6.2	VAME		

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 ell other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY+ST-ZIP