

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000086731 (3)

1. Corporation Name

ORTEGA MARINA TECH CENTER, INC.



Principal Place of Business

4451 HERSCHEL ST.
JACKSONVILLE FL 32210

Mailing Address

4451 HERSCHEL ST.
JACKSONVILLE FL 32210

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

9. Name and Address of Current Registered Agent

BEILEY, RICHARD A ESQ
1 BISCAYNE TOWER, SUITE 2600
TWO SOUTH BISCAYNE BLVD.
MIAMI FL 33131-1802

3. Date Incorporated or Qualified

11/13/1995

3a. Date of Last Report

4. FEI Number

59-3348852

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

10. Name and Address of New Registered Agent

81

GEORGE E. RIDGE

82

Street Address (P.O. Box Number is Not Acceptable)

225 WATER STREET

83

SUITE 900

84

CITY JACKSONVILLE

FL

85

Zip Code

32202

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 is 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, Sections 607.0502 and 607.1508, Florida Statutes.

SIGNATURE

Signature of Registered Agent

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	WALTHER, BRUCE	
STREET ADDRESS	225 PALMETTO DR.	
CITY-ST-ZIP	ST. AUGUSTINE FL 32095	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY-ST-ZIP	
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY-ST-ZIP	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY-ST-ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY-ST-ZIP	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY-ST-ZIP	

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BRUCE WALTHER

600001919048
-08/12/96--01032--00035
***225.00

7/17/96 (901) 880-5538

CR2E034 (12/95)