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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000088374 (0)

MARINE DEVELOPMENT CORP.

FILED Feb 25 1998 8:00am Secretary of State

MARINE DEVELOPMENT COM.									
Principal Place of Business	Mail	ing Address					***************************************	1011 4101 1081	
4689 ROOSEVELT BLVD. JACKSONVILLE FL 32210 4689 ROOSEVELT BLVD. JACKSONVILLE FL 32210									
					DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualified 11/17/1995			
2. Principal Place of Business	2a.	Mailing Address				4. FEI Number	Α	pplied For	
21	26					59-3347877	٨	lot Applicable	
Suite, Apt. #, etc. Suite, Apt. #, e			etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	27	City & State				- Flection Compaign Financing) May Be	
23	28	ony a olalo				6. Election Campaign Financing Trust Fund Contribution		to Fees	
Zip Country	+		Country			8. This corporation owes or has paid the current year Intangible			
24 25	29		30	Ī		Personal Property Tax due June 30. 🔲 Yes 🔲 No			
g. Name and Address of Current		red Agent				10. Name and Address of New Registered	Agent		
RICHARD G. HATHAWAY, P.A.		·		81	Name				
7077 BONNEVAL ROAD, SUITE 200			ŀ	B2	Street Addre	ess (P.O. Box Number is Not Acceptable)			
JACKSONVILLE FL 32216				-	Oli Dol Madic	oo (r.o. box rambor to rist receptable)			
				В3					
			ł	B4	City		85 Zip	Code	
					,	FI	_ .		
Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State o agent. I am familiar with, and accept the obligations.	l Florida	 Such change was: 	authorized	ihν	the corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the ap	of changing pointment a	its registered s registered	
SIGNATURE					···	ad when reinstating) DATE			
Signature, lyped or printed name of registered agent OFFICERS AND			TE: Registered	Age	nt signature require	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTO	PS IN 12	
12. OFFICERS AND	DINLO	☐ DELETE				ADDITIONS/CHANGES TO OTHICERS AT	Change	Addition	
NAME BACHLE, A.H.		12 N					_ •		
STREET ADDRESS 4669 ROOSEVELT BLVD.				1.3 STREET ADDRESS		•			
CITY-ST-ZIP JACKSONVILLE FL 32210	OVOODBELLE EL OOG40			1.4 CITY-ST-ZIP					
TITLE		DELETE	2.1 TIT				Change	Addition	
NAME			2.2 NA	ME					
STREET ADDRESS			2.3 ST	REET	ADDRESS				
CITY-ST-ZIP			2. 4 C/	TY-5	ST-ZIP				
TITLE		DELETE	3.1 TITLE				Change	Addition	
NAME			32 NA	ME					
STREET ADDRESS			3.3 STI	REET	ADDRESS				
CITY-ST-ZIP			3.4. CO	TY-S	ST-ZIP				
TITLE		☐ DELETE	4.1 TIT	4.1 TITLE			Change	Addition	
NAME			4. 2 NA	ME					
STREET ADDRESS			4.3 STI	REET	ADDRESS				
City-St-ZiP		,		4.4 CITY+ST-ZIP			——————————————————————————————————————	1 (1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
TITLE		☐ DELETE		5.1 TITLE			Change	Addition	
NAME			5.2 NA					-	
STREET ADDRESS			5.3 STI	REET	ADDRESS				
City-St-ZiP			5.4 CtT		T-ZIP			A didition	
TITLE		☐ DELETE	61 TIT				☐ Change	Addition	
NAME			62 NA						
STREET ADDRESS			1		ADDRESS				
CITY-ST-ZIP			64.00	Y-5	T-ZIP			I	

4. Thereby 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.

0.10-01

C. L. 20 1000 1001 784 139