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 # P95000088374

1. Corporation Name

FILED Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90094 036 ***150.00

MARINE	DEVELOPMENT CORP.						
Principal Place of Business Mailing Address						- (:	
4669 ROOSEVEI JACKSONVILLE	DO NOT WRITE IN 3. Date Incorporated or Qualifed 11/17/1995 2a. Mailing Address 2b. Mailing Addres					DO NOT WRITE IN THIS SPACE	
			-			'	
		<u> </u>					
2. Principal Pl	ace of Business	2a. Mailing Address				1	
21							
Suite, Apt. #, etc.		Suite, Apt. #, etc.	<u> </u>			5: Certificate of Status Desired \$8.75 Additional Fee Required	
City & State	9	City & State	City & State			6. Election Campaign Financing \$5.00 May Be	
23		28				Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Cour	ntry		8. This corporation owes the current year Intangible	
24	25	11	30			Personal Property Tax.	
	9. Name and Address of Current	Registered Agent		81	Name	10. Name and Address of New Registered Agent	
RICHARD G. HATHAWAY, P.A.				"[Name		
7077 BONNEVAL ROAD, SUITE 200			Ţ	82	Street Address (P.O. Box Number is Not Acceptable)		
JACH	KSONVILLE FL 32216			83			
			ŀ	84	City	FL 85 Zip Code	
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligati	if Florida. Such change was a	utnonzea	DV I	tne corbor	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered	
SIGNATURE							
Signature, typed or printed name of registered agent and title if applicable. (NC				Agen	t signature req	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.	<u> </u>			13.		Change Addition	
TITLE	D D	Operate	1.2 NA				
NAME	BACHLE, A.H. 4669 ROOSEVELT BLVD.				ADDRESS		
STREET ADDRESS			1.4 CIT				
CITY-ST-ZIP	JACKSONVILLE FL 32210	☐ DELETE	2.1 TT	_	1-21	☐ Change ☐ Addition	
TITLE			2.2 NA				
NAME			- 1		ADDRESS		
STREET ADORESS			2.4 CI		4	* *	
CITY-ST-ZIP TITLE		DELETE	3.1 TIT	_		Change Addition	
NAME			3.2 NA	ME			
STREET ADDRESS					ADDRESS		
)	_		3.4. CI		1		
CITY-ST-ZIP TITLE		☐ DELETE	4.1 111			☐ Change ☐ Addition	
NAME		_	4. 2 N		\		
STREET ADDRESS	,		- 1		ADDRESS	·	
CITY-ST-ZIP			4.4 CIT				
TITLE		DELETE	5.1 TIT	_	$\overline{}$	☐ Change ☐ Addition	
NAME			5.2 NA	ME			
STREET ADDRESS			5.3 STI	REET	ADDRESS		
CITY-ST-ZIP			5.4 CIT	r-s1	T-ZIP		
TITLE		☐ DELETE	6.1 111	LE		☐ Change ☐ Addition	
NAME			6.2 NA	ME			
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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 all other like empowered.

6.4 CITY-SY-ZIP

SIGNATURE:

CITY-ST-ZIP