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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 23 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000070051 (3)

MARINER VANS & TRUCKS, INC.

Principal Place of Business Mailing Address						I INDEFORE THE PRINT WHITE MEET AND IN		(1) <b>VIII</b> II	### #### #####
2372 DAVIS BO NAPLES FL 339		2372 DAVIS BOULEVARD NAPLES FL 34104-4213							
						3. Date Incorporated or Qualified 08/22/1996	3a. Dat	e of Last	
2. Principal P	lace of Business	2a, Mailing Address				4. FEI Number			Applied For
21		26			65.070029	10	1	Not Applicable	
Suite, Apt		Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional Fee Required				
City & Stat	€	City & State			6. Election Campaign Financing \$5.00 May Be				
23		28			Trust Fund Contribution Added to Fees				
Zip	·		·			8. This corporation has liability for intangible tax under s. 199.032,			
24	25 9. Name and Address of Curren	29	30	,			Yes _		
1 4 20	······································	i negistered Agent		81	Name	10. Name and Address of New Re	gistered A	gent	
Larson, Karen a 993 North Collier Boulevard				82		ress (P.O. Box Number is Not Acceptab	ile)	<del></del>	····
MARCO ISLAND FL 34146				83		occupation of the second			
				84	City			Tabl 3	- 0 - 1 -
					,		FL		p Code
olfice or r agent La	to the provisions of Sections 607.0502 egistered agent, or both, in the State rn familiar with, and accept the obliga	2 and 607.1508, Florida Statu of Florida. Such change was itions of, Section 607.0505, F	ites, the at authorized lorida Stat	bove d by lutes	enamed corp the corporation.	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of o at the appo	changing intment a	its registered us registered
SIGNATURE	Signation typed to perfect race each receivered age	n and tile Lappicable. (NO	TE Registered	d Age	ent signature requir	red when reinstating)	DATE		
12.	OFFICERS AND	T. T	13.			ADDITIONS/CHANGES TO OFFICE	ERS AND	DIRECTO	ORS IN 12
TOLE	PVO	DELETE	1 1 T)	TLE		447-447-44-4-4-4-4-4-4-4-4-4-4-4-4-4-4-	T	Change	Addition
NAME	Russell, Robert L		1.2 NA	AME					
STREET ADDRESS	2372 DAVIS BOULEVARD		1.3 ST	REET	ADDRESS				
CITY-ST-ZiP	NAPLES FL 33962		140	TY-S	T-ZIP				
T:TLE	STD	DELETE	21 T/	ILE				Change	Addition
NAME	Russell, Linda L		2 2 NA	AME					
STREET ADDRESS	2372 DAVIS BOULEVARD		2.3 ST	REET	ADDRESS				
CITY-ST ZIP	NAPLES FL 33962		2 4 0	iTY-S	ST-ZIP				
TITLE		DELETE	3.1 Til	TLE			I	Change	Addition
NAME			3.2 N/	ME					
STREET ADDRESS			3.3 ST	REET	ADDRESS				
CITY-ST-ZIP			3.4. C	ITY - S	ST- ZIP				
TITLE	•	DELETE	4.1 11	TLE			Ţ	Change	Addition
NAME			4. 2 N	AME					ļ
STREET ADORESS			4.3 ST	REET	ADDRESS				
CITY - ST - ZIP			4.4 CI	TY - SI	T-ZIP				
TITLE		DELETE	5,1 7 ]	TLE			Ţ	Change	Addition
NAME			5.2 NA	\M€					
STREET ADORESS			5.3 ST	REET	ADDRESS				
CITY-ST-ZIP			5.4 CI	TY-SI	T-ZIP				
TITLE		DELETE	6.1 TI				T	Change	Addition
NAME			6.2 NA	ME	}				
STREET ADORESS			6.3 ST	REET.	ADDRESS				

CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 1.1 do 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