

FILE NOW: FILING FEE AFTER MAY 1ST IS \$50.00

FILED  
Mar 31 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Morandam</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P97000000031 (9)**

1. Corporation Name  
**NORTHSTAR MARINE, INC.**

Principal Place of Business  
**927 EMERALD BAY DRIVE  
DESTIN FL 32541**

Mailing Address  
**927 EMERALD BAY DRIVE  
DESTIN FL 32541**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <b>4503 OLD PLANTATION PL</b>		2a. Mailing Address 26 <b>4503 OLD PLANTATION PLACE</b>		3. Date Incorporated or Qualified <b>01/01/1997</b>	
Suite, Apt. #, etc. 22		Suite, Apt. #, etc. 27		4. FEI Number <b>59 3417168</b>	
City & State 23 <b>DESTIN, FLORIDA</b>		City & State 28 <b>DESTIN, FLORIDA</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
Zip 24 <b>32541</b>		Zip 29 <b>32541</b>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
Country 25		Country 30 <b>OKALOOSA</b>		8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**HODGES, J. CHAPLINE III  
927 EMERALD BAY DRIVE  
DESTIN FL 32541**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

**FL**

85 Zip Code

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 was 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, Section 607.0505, Florida Statutes.

SIGNATURE

*J. Chapline Hodges III*  
Signature, typed printed name of registered agent and title if applicable

**J. CHAPLINE HODGES III**

(NOTE: Registered Agent signature required when reinstating)

**3/26/98**  
DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D HODGES, J. CHAPLINE III 927 EMERALD BAY DRIVE DESTIN FL 32541</b> <input type="checkbox"/> DELETE	11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.

SIGNATURE:

*J. Chapline Hodges III*  
**J. CHAPLINE HODGES III** **3/26/98**

**850-650-3850**

CR2E034 (10/97)