

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P97000020501

1. Entity Name
SPECIALTY MARINE SERVICE OF NAPLES, INC.



Principal Place of Business
4384 PROGRESS AVE
NAPLES, FL 34104

Mailing Address
1672 ROYAL CIRCLE
NAPLES, FL 34112

FILED
Jul 23, 2008 08:00 AM
Secretary of State



07212008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3431471

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DUROCHER, LEE A
1672 ROYAL CIRCLE
NAPLES, FL 34112

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00
Due by September 12, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME DUROCHER, LEE A
STREET ADDRESS 855 8TH STREET SOUTH
CITY-ST-ZIP NAPLES, FL 34102

TITLE VSTD
NAME DUROCHER, JEFFREY T
STREET ADDRESS 855 8TH STREET SOUTH
CITY-ST-ZIP NAPLES, FL 34102

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Lee A Durocher

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/21/08

Date

239-403-8321

Daytime Phone