PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

Jun 01, 1999 8:00 am Secretary of State

06-01-1999 90023 002 ***150.00

DOCUMENT # P98000101523

SOUTHERN MARINE UNDERWRITERS, INC.

Principal Place of Business

Mailing Address

5200 ROLAC ROAD JACKSONVILLE FL 32207 5200 ROLAC ROAD JACKSONVILLE EL 3220

JACKSUITVIELE FL 3220/	INCRODITYILLE FL 32207	JACKSONVILLE FL 32207		DO NOT WRITE IN THIS SPACE	
			3. Date Incorporated or Qualifed		
			12/07/1998	ļ	
2. Principal Place of Business	2a. Mailing Address	Λ.	4. FEI Number	Applied For	
21 2500 Rolac Road	26 2500 Rola	c Kood	59-3546823	Not Applicable	
Suite, Apt. #, etc.	Suite, Apt#, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required	
City & State	City & State		L C Firstin Committee Firstin		
23 Jacksonville FL	28 Jackson Vill	e. FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 07 Country	Zip	Country	8. This corporation owes the current y	ear Intangible	
24 327 ES US	A 29 32707 3	o usia_	Personal Property Tax.	☐ Yes ☐ No	
9. Name and Address of Current Registered Agent 0. Name and Address of New Registered Agent					
COASTREE D D		81 Name			
CRABTREE, R R			Address (P.O. Box Number is Not Acceptable)		
8375 DIX ELLIS TRAIL STE. JACKSONVILLE FL 32256	401				
JACKSUIVILLE PL 32296		83			
		84 City		85 Zip Code	
	007.0500 1007.4500 51 11 01 11			FL 13 25 Gods	
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, Florid	a Statutes.		11-1-	
SIGNATURE B	Borney I. Mecon registered agent and title if applicable. (NOTE: Re	egistered Agent signature re	sident	7/25/94	
	ICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 12	
TITLE P	☐ DELETE	1.1 Π/LE	TV	Change Addition	
NAME MECOM, BARNEY E		1.2 NAME	Takkuell, Terry 2500 loke Rd	·	
STREET ADDRESS 5200 ROLAC ROAD		1.3 STREET ADDRESS			
CMY-ST-ZIP JACKSONVILLE FL 322	207	1.4 CITY-ST-ZIP	Sacksonville, FL32207		
TITLE STV	☐ DELETE	2.1 TITLE	8	☐ Change ☐ Addition	
NAME CALDWELL, TERRY		2.2 NAME	Kacangarchia		
STREET ADDRESS 5200 ROLAC ROAD		2.3 STREET ADDRESS	-		
CITY-ST-ZIP JACKSONVILLE FL 322		2.4 CITY-\$T-ZIP			
TITLE	☐ DELETE	3.1 TITLE	\$	☐ Change	
NAME		3.2 NAME	Mccom, Ken.		
STREET ADDRESS		3.3 STREET ADDRESS	2500 RELOC Kd		
CITY-ST-ZIP		3.4. CITY-ST-ZIP	Mccom, Kerd 2500 Ebbc Rd Sackson ville, FL 37	20+	
TITLE	☐ DELETE	4.1 TITLE	·	Change Addition	
NAME		4. 2 NAME			
STREET ADDRESS		4.3 STREET ADDRESS			
CITY-ST-ZIP	☐ DELETE	4.4 CITY-ST-ZIP		☐ Change ☐ Addition	
TITLÉ	C) pereie	5.1 TITLE 5.2 NAME		Change D Addition	
NAME		5.3 STREET ADDRESS			
STREET ADDRESS		5.4 CITY-ST-ZIP			
CITY-ST-ZIP TITLE	□ DELETE	6.1 TITLE		☐ Change ☐ Addition	
i	ריו מיריבוב	6.2 NAME		C Autulia D Languagu	
NAME		6.3 STREET ADDRESS			
STREET ADDRESS		6.4 CITY-ST-ZIP			
CITY-ST-ZIP		0.4 CH 11-31-ZIP			

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.

SIGNATURE

Barney E.: Mecon

President 4/25/aq

904 448-5457

SILL) #COUNTY

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