

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000091187

FILED  
Apr 22, 2004  
Secretary of State

Entity Name: TAMPA BAY SHIPBUILDING & REPAIR CO., INC.

## Current Principal Place of Business:

C/O JAMES W. GOODWIN  
400 NORTH TAMPA STREET, SUITE 2300  
TAMPA, FL 33602

## New Principal Place of Business:

## Current Mailing Address:

C/O JAMES W. GOODWIN  
400 NORTH TAMPA STREET, SUITE 2300  
TAMPA, FL 33602

## New Mailing Address:

FEI Number: 59-3608266      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GOODWIN, JAMES W  
400 NORTH TAMPA STREET  
SUITE 2300  
TAMPA, FL 33602 US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CEO ( ) Delete  
Name: BENDER, THOMAS B JR  
Address: 265 S WATERS STREET  
City-St-Zip: MOBILE, AL 36601

Title: VPS ( ) Delete  
Name: CROUSHORE, BRUCE J  
Address: 265 S WATER STREET  
City-St-Zip: MOBILE, AL 36601

Title: P ( ) Delete  
Name: HENDRY, AARON  
Address: 1200 SERTOMA DRIVE  
City-St-Zip: TAMPA, FL 33605

Title: VCFO ( ) Delete  
Name: HELTON, ELGIN  
Address: 1130 MCCLOSKEY BLVD  
City-St-Zip: TAMPA, FL 33605

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELGIN HELTON

VCFO

04/22/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date