FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995 5/1/95

FLORIDA DEPARTMENT OF STATE

B-6474 KC

APPROVED AND FILED

95 MAY -1 PM 9:15

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # **S11618** (3)

1. Corporation Name

STOP'S MARINE, INC.

Principal Office Address	Mailing Address
P.O. BOX 518 GOODLAND FL 33933	P.O. BOX 518 GOODLAND FL 33933

3. Date Incorporated or Qualified: 11/06/1990	3a. Date of Last Report: 05/01/1994
4. FEI Number: 65-0225262	Applied For / Not Applicable
5. Certificate of Status Desired [ ]	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution [ ]	$5.00 May Be Added to Fees
8. The corporation has liability for intangible tax under s. 199.032 Florida Statutes. [ ] Yes [ ] No	

2. Principal Office Address (21) Suite, Apt. #, etc. (22) City & State (23) Zip (24) Country (25)

2a. Mailing Address (26) Suite, Apt. #, etc. (27) City & State (28) Zip (29) Country (30)

9. Name and Address of Current Registered Agent

STOPPELBEIN, PAMELA A.
501 EAST COCONUT AVENUE
GOODLAND FL 33933

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 ______ DATE ______

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	STOPPELBEIN, PAMELA A.
STREET ADDRESS	501 E COCONUT AVE
CITY-ST-ZIP	GOODLAND FL
TITLE	D
NAME	STOPPELBEIN, JOHN V. III
STREET ADDRESS	501 E COCONUT AVE
CITY-ST-ZIP	GOODLAND FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

(blank entries 1–6: Title, Name, Street Address, City-St-Zip; [ ] Change [ ] Addition)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Pamela A. Stoppelbein, Pres 4/30/95 (813) 394-8000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PAMELA A. STOPPELBEIN