

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra D. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 30 AM 8:56

DOCUMENT # S25617 (9)

1. Corporation Name

OCEAN CONSTRUCTION, INC.

Principal Place of Business

12651 METRO PARKWAY
BOX 10
FORT MYERS FL 33912
US

Mailing Address

12651 METRO PARKWAY
BOX 10
FORT MYERS FL 33912
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/17/1991

3a. Date of Last Report

01/25/1994

4. FEI Number

65-0243910

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 12651 Metro Pkwy

2a. Mailing Address

26 12651 Metro Pkwy

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 Ft. Myers, FL

City & State

28 Ft. Myers, FL

Zip

Country

Zip

Country

24 33912

25

29 33912

30

9. Name and Address of Current Registered Agent

COSTELLO, TRUMAN J.
12670 NEW BRITANNY BLVD.
#101
FT. MYERS FL 33907

10. Name and Address of New Registered Agent

01 Name

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

03

04 City

FL

05 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

Signature (typed or printed name of registered agent and fee filer) (Applicable)

(Applicable) Registered Agent Signature (required when substituting)

(Applicable)

12. OFFICERS AND DIRECTORS

TITLE

D

NAME

SASSER, DAVID L.
13007 RIVER RD., S.E.
FT. MYERS FL

STREET ADDRESS

CITY, ST, ZIP

TITLE

V

NAME

STONE, JOHN
8731 CHATHAM ST.
FORT MYERS FL

STREET ADDRESS

CITY, ST, ZIP

TITLE

V

NAME

SASSER, WILLIAM
1425 YORKSHIRE ST.
PORT CHARLOTTE FL

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

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY, ST, ZIP

17541 OAK Creek Rd
Alicia, FL 33920

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY, ST, ZIP

11600 Shirley Lane
No. Ft. Myers, FL 33903

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY, ST, ZIP

319 Yorkshire St.
Pt. Charlotte, FL 33952

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY, ST, ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY, ST, ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY, ST, ZIP

☒ Change ☐ Addition

☒ Change ☐ Addition

☒ Change ☐ Addition

☐ Change ☐ Addition

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☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.03(3)(b), 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 registered agent authorized to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report as an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR

3/27/95

813 768-0440