FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 APR 20 PM 2:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S59138** **(5)**

1. Corporation Name
SHIP 'N SHORE ENTERPRISES, INC.

Principal Place of Business	Mailing Address
2645 W. MARION AVENUE #514 PUNTA GORDA FL 33950	3325 BRENTWOOD CT PUNTA GORDA FL 33950 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/12/1991
3a. Date of Last Report: 04/07/1994

2. Principal Place of Business	2a. Mailing Address
21 3325 BRENTWOOD CT	26 3325 Brentwood CT.
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 PUNTA Gorda FL	City & State 28 Punta Gorda FL
Zip 24 33950 Country 25 USA	Zip 29 33950 Country 30 USA

4. FEI Number: 65-0275238 ☐ 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

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

9. Name and Address of Current Registered Agent

AKERS, ROBERT
3325 BRENTWOOD CT
PUNTA GORDA FL 33950

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
Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating.

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PVD	11 TITLE		☒ Change ☐ Addition
NAME	AKERS, ROBERT	12 NAME		
STREET ADDRESS	2645 W. MARION AVE#514	13 STREET ADDRESS	3325 BRENTWOOD COURT	
CITY-ST-ZIP	PUNTA GORDA FL	14 CITY-ST-ZIP	PUNTA GORDA FL 33960	
TITLE	ST	21 TITLE		☒ Change ☐ Addition
NAME	AKERS, MARILYN J.	22 NAME		
STREET ADDRESS	2645 W. MARION AVE#514	23 STREET ADDRESS	3325 BRENTWOOD COURT	
CITY-ST-ZIP	PUNTA GORDA FL	24 CITY-ST-ZIP	PUNTA GORDA FL 33950	
TITLE		31 TITLE		☐ Change ☐ Addition
NAME		32 NAME		
STREET ADDRESS		33 STREET ADDRESS		
CITY-ST-ZIP		34 CITY-ST-ZIP		
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY-ST-ZIP		44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

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)(k), 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: Robert W. Akers 2/3/95 (813)637-7171
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
ROBERT W. AKERS, PRESIDENT

0320434 CP