PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **S87974**

1. Corporation Name

DOUGHERTY MARINE, INC.

Doddiil	1111 1984 III (L.)						
Principal Place	of Business	Mailing Address				, 1 Bibli Bible Ribli Bibli Bib	111 81811 1881
167 BELL AVE OAK HILL FL 32759 OAK BELL FL 32759							
US US					DO NOT WRITE IN	THIS SPACE	
					3. Date Incorporated or Qualifed 10/17/1991		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	App	lied For
21					59-3092768		Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certifcate of Status Desired	\$8.75 Ad	I
22 27					3, Continuate of Citation Desired	Fee Req	<u> </u>
City & State	е	City & State			6. Election Campaign Financing	\$5.00 N	
23		28			Trust Fund Contribution	Added to	Fees
Zip	Country	Zip	Country		8. This corporation owes the current y		
24	25		30		Personal Property Tax.		□No
	9. Name and Address of Current	Registered Agent	81	Name	10. Name and Address of New Regis	tered Agent	
2001	CHEDTY BOREDT I		61	Name		<u>,</u>	
DOUGHERTY, ROBERT J 3691 US HWY 1 EDGEWATER FL 32141 CAL H. 11 FL 32759				Street Add	fress (P.O. Box Number is Not Acceptable)		
	EWATER FL 32141		00				
EDGI	EWAIER PL 32141	H.11 12	83				ļ
		"3 275g	84	City		85 Zip Ci	ode
						FL "	
office or re agent. I ar	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligation	if Florida, Such change was aut	thorized by	the corporati	poration submits this statement for the purp ion's board of directors. I hereby accept the	appointment as regi	istered
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: F	Registered Ager	1 signature requir	red when reinstating) O	ATE	
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTOR	RS IN 12
TITLE	PD DELETE		1.1 TITLE			Change	☐ Addition
NAME	DOUGHERTY, ROBERT J		1.2 NAME				
STREET ADDRESS	167 BELL AVE		1.3 STREE	ADDRESS		•	
CITY-ST-ZIP	OAK HILL FL 32759		1.4 CITY-ST-ZIP				
TITLE			2.1 TITLE			☐ Change	☐ Addition
NAME	•		2.2 NAME		_		
STREET ADDRESS	167 BELL AVE		2.3 STREET ADDRESS				
CITY-ST-ZIP	OAK HILL FL 32759		2.4 CITY-S	T-ZIP			
TITLE	T DELETE		3.1 TITLE			Change	☐ Addition
NAME	DOUGHERTY, BARBARA C		3.2 NAME				
STREET ADDRESS	167 BELL AVE		3.3 STREE	ADDRESS			
CITY-ST-ZIP	OAK HILL FL 32759		3.4. CITY-S	T-ZIP			
TITLE		☐ DELETE	4.1 TITLE			☐ Change	☐ Addition
NAME			4. 2 NAME				İ
STREET ADDRESS			4.3 STREE	ADDRESS			
CITY-ST-ZIP			4.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	5.1 TITLE			☐ Change	Addition
NAME			5.2 NAME	1			
STREET ADDRESS			5.3 STREE	TADDRESS			
CITY-ST-ZIP			5.4 CITY-S	T- ŽIP			
TITLE		☐ DELETE	6.1 TITLE			☐ Change	Addition
NAME			6.2 NAME	†			
STREET ADDRESS			6.3 STREE	T ADDRESS]

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 or an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90209 046 ***150.00