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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **V65533**

FOLSOM MARINE CONTRACTORS, INC.								. 6:6:: 4:6:: 4:5:: 6:6:	ne kerit din il 1 83 1
Principal Place of Business Mailing Address 2821A WORTH AVE 2821A WORTH AVE ENGLEWOOD FL 34224 ENGLEWOOD FL 34224									
US US							DO NOT WRITE IN THIS SPACE		
!							3. Date Incorporated or Qualifed 09/21/1992		
\vdash	Principal Place of Business 2a. Mailing Address			ddress			4. FEI Number	├ - ├ -	Applied For
21	26 Suite, Apt. #, etc. Suite, Apt. #, etc.			t # etc			65-0358445		Not Applicable Additional
22				t. #, 0 t0.	•		5. Certifcate of Status Desired		Required
City & State				City & State			6. Election Campaign Financing	\$5.0	0 May Be
23			28				Trust Fund Contribution	Adde	d to Fees
	Zip	Country	Zip	_	Country	y	8. This corporation owes the current ye		□No
24		25	29		iO]		Personal Property Tax. 10. Name and Address of New Regis	Yes Agent	
_		9. Name and Address of Curre	ant Registered Age	nt	81	Name	ID. Name and Address of New Regis	tered Agent	
	MEDI	EIROS, DANIEL A.				ì	(D.O. D. M. Louis No. Assessable)		
8490 S TAMIAMI TR					82	Street Add	ress (P.O. Box Number is Not Acceptable)		
Ì	SARA	ASOTA FL 34238			83	1			
ļ					84	City		85 Zi	ip Code
								FL	
1	office or re	to the provisions of Sections 607.05 egistered agent, or both, in the Stat m familiar with, and accept the oblig	te of Florida. Such cl	hande was aut	norized by	the corporati	poration submits this statement for the purpoion's board of directors. I hereby accept the	ose of changing appointment as	its registered registered
S	IGNATURE	,,							
Signature, typed or printed name of registered agent and little if applicable. (NOTE: Reg						ent signature require	ADDITIONS/CHANGES TO OFFICE	ATE DS AND DIRECT	TORS IN 12
1: TII		PD OFFICERS A		DELETE	13.		ADDITIONS/CHANGES TO CITTLE	☐ Chang	
	ME I	FOLSOM, RICHARD A.	_		1.2 NAME	İ			
ì	REET ADDRESS	635 CORAL DR			1.3 STREE	T ADDRESS			
1	ry-st-zip	NOKOMIS FL			1.4 CITY-5	ST-ZIP			
-	le l	VD		DELETE	2.1 TITLE			Chang	ge
NA.	ME	Souperon, Robert			2.2 NAME				
) st	REET ADDRESS	P O BOX 103 N/A			2.3 STREE	TADORESS			
cr	TY-ST-ZIP	PLYMOUTH NH			2. 4 CITY-	ST-ZIP		□ Ch	ie Addition
TE	TLE	STD	•	DELETE	3.1 TITLE			☐ Chang	je Audilion
N/A	ME	FOLSOM, CHRISTINA P			3.2 NAME				
1	REET ADDRESS	635 CORAL DR				ET ADDRESS			
_	TY-ST-ZIP	NOKOMIS FL		DELETE	3.4. CITY-	ST-ZIP		☐ Chang	ge Addition
	rle		L	_ 0	4.1 TITLE 4. 2 NAME				_
1	ME REET ADDRESS					ET ADDRESS			
1	TY-ST-ZIP				4.4 CITY-1				
_	TLE			DELETE	5.1 TITLE			☐ Chang	ge Addition
1	ME I				5.2 NAME				
1	REET ADDRESS				5.3 STREE	ET ADORESS			
	TY-ST-ZIP				5.4 CITY-				
-	TLE .		ſ	DELETE	6.1 TITLE			☐ Chang	ge 🗌 Addition
N/	WE				6.2 NAME				
01	DEET ADDRESS				■ 6.3 STRE	ET ADDRESS			

14. I heraby 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 on an attachment with an address, with all other like empowered.

64 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

Richard
NAME OF SIGNING OFFICER OF DIRECTOR Richard A. Folsom 4/30/99 Date

941-475-8300

Daytime Phone #