

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000083588

**FILED**  
**Feb 14, 2013**  
**Secretary of State**  
**CC9973405922**

**Entity Name:** RAM MARINE SERVICES, INC.

**Current Principal Place of Business:**

494 RIVERVIEW DR. SOUTH  
NOKOMIS, FL 34275-2776

**Current Mailing Address:**

494 RIVERVIEW DR., SOUTH  
NOKOMIS, FL 34275-2776

**FEI Number: 65-1036444**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

LOWELL, DAVID A  
494 RIVERVIEW DR., SOUTH  
NOKOMIS, FL 34275-2776 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name LOWELL, DAVID A  
Address 494 RIVERVIEW DR.  
City-State-Zip: NOKOMIS FL 34275

Title S  
Name LOWELL, DAVID A  
Address 494 RIVERVIEW DR.  
City-State-Zip: NOKOMIS FL 34275

Title T  
Name LOWELL, DAVID A  
Address 494 RIVERVIEW DR.  
City-State-Zip: NOKOMIS FL 34275

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE: DAVID A. LOWELL**

**PRESIDENT**

**02/14/2013**

Electronic Signature of Signing Officer/Director Detail

Date