

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 13, 2002 8:00 am
Secretary of State

03-13-2002 90131 035 ***150.00

DOCUMENT # 583468

1. Entity Name
THE SEAFARER REEF, INC.

Principal Place of Business

1345 PLAYMOOR DR.
PALM HARBOR FL 34683
US

Mailing Address

1345 PLAYMOOR DR.
PALM HARBOR FL 34683
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3386 Hunt Club Dr.
 Suite, Apt. #, etc.

3. Mailing Address

3386 Hunt Club Dr.
 Suite, Apt. #, etc.

City & State

Clearwater, Fla

City & State

Florida

4. FEI Number

59-1845818

Applied For

Not Applicable

Zip

33761

Country

Pinellas

Zip

33761

Country

Pinellas

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

DEMAs, JOANNA
1345 PLAYMOOR DR.
PALM HARBOR FL 34683

7. Name and Address of New Registered Agent

Name **Joanna Demas**

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

3386 Hunt Club Dr.

City **Clearwater**

FL

Zip Code

33761

8. 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

Joanna Demas

JOANNA DEMAS, PRES.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **DEMAs, JOANNA**
STREET ADDRESS **1345 PLAYMOOR DR.**
CITY-ST-ZIP **PALM HARBOR FL 34683**

TITLE **VPS** ☐ Delete
NAME **DEMAs, CHRIS**
STREET ADDRESS **1345 PLAYMOOR DR**
CITY-ST-ZIP **PALM HARBOR FL 34683**

TITLE **D** ☐ Delete
NAME **DEMAs, WILLIAM**
STREET ADDRESS **6081 21ST AVE N.**
CITY-ST-ZIP **SAINT PETERSBURG FL 33710**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PRES** ☒ Change ☐ Addition
NAME **JOANNA DEMAS**
STREET ADDRESS **3386 Hunt Club Dr.**
CITY-ST-ZIP **Clearwater, FL 33761**

TITLE **VPS** ☒ Change ☐ Addition
NAME **CHRIS DEMAS**
STREET ADDRESS **3386 HUNT CLUB DR**
CITY-ST-ZIP **Clearwater, FL 33761**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/1/02 **786-4929**

Date

Daytime Phone #

CR2E034 (9/01)