FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT **1996**	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 736561 (2)

1. Corporation Name

INTERSEA FOUNDATION, INC.

Principal Place of Business	Mailing Address
#3 LAZY OAKS CARMEL VALLEY CA 93924	#3 LAZY OAKS CARMEL VALLEY CA 93924

3. Date Incorporated or Qualified **08/10/1976**	3a. Date of Last Report **08/09/1995**

2. Principal Place of Business	2a. Mailing Address	4. FEI Number **59-1684622**	Applied For
21	26 **P.O. Box 917**		Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired ☐	**$8.75** Additional Fee Required
22	27		
City & State	City & State	6. Election Campaign Financing Trust Fund Contribution ☐	**$5.00** May Be Added to Fees
23	28 **Carmel Valley, CA**		
Zip	Country	Zip 93924	Country 30 **U.S.A.**	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No
24	25	29		

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324	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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE _____

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

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE **PD** ☐DELETE NAME **D'VINCENT, CYNTHIA GAY** STREET ADDRESS **#3 DE LOS HELECHOS** CITY-ST-ZIP **CARMEL VALLEY CA 93924**	1.1 TITLE ☐Change ☐Addition 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP
TITLE **STD** ☐DELETE NAME **SIDMAN, GEORGE** STREET ADDRESS **24330 SAN PEDRO LN** CITY-ST-ZIP **CARMEL CA 93921**	2.1 TITLE ☐Change ☐Addition 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP
TITLE **D** ☐DELETE NAME **PADDOCK, ELDREDGE G** STREET ADDRESS **910 W. CARMEL VALLEY ROAD** CITY-ST-ZIP **CARMEL VALLEY CA 93924**	3.1 TITLE ☐Change ☐Addition 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP
TITLE **D** ☐DELETE NAME **WILSON, SAMUEL T** STREET ADDRESS **13 BROOKSIDE COURT** CITY-ST-ZIP **SAN ANSEIMO CA 34960**	4.1 TITLE ☐Change ☐Addition 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP
TITLE **D** ☒DELETE NAME **WAGNER, TERESA L** STREET ADDRESS **P.O. BOX 522 NA** CITY-ST-ZIP **MONTEREY CA 93942**	5.1 TITLE **D** ☒Change ☐Addition 5.2 NAME **Christopher Havard** 5.3 STREET ADDRESS **11 Logan Place** 5.4 CITY-ST-ZIP **Rowayton, CT 06853**
TITLE ☐DELETE NAME STREET ADDRESS CITY-ST-ZIP	6.1 TITLE ☐Change ☐Addition 6.2 NAME 6.3 STREET ADDRESS 6.4 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _Cynthia D'Vincent_   4-2-96   408 659 5807

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #

CR2E037 (12/95)