2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 04, 2002 8:00 am
Secretary of State
02-04-2002 90114 005 ****61.25

DOCUMENT # 742862

1. Entity Name

SEASCAPE OF LITTLE HICKORY ISLAND, INC.

Principal Place of Business	Mailing Address
25810 HICKORY BLVD. BONITA SPRINGS FL 34134 US	25810 HICKORY BLVD. BONITA SPRINGS FL 34134 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1880436 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SHONAK, JOHN R 25810 HICKORY BLVD BONITA SPRINGS FL 34134	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD WALSH, THOMAS 77 HUSSACK BRROK RD DUXBURY MA 02331	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V/D ANTHONY BIANCANIELLO 181 HILLSIDE AVE. WILLISTON PARK, NY 11596	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BROMHEAD, MARK 10331 EMERALD WOODS AVE ORLANDO FL 32836	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P/D THOMAS WALSH 77 TUBSOCK BROOK RD. DUXBURY MA 02331	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD BOEHN, KENNETH 6106 WHITETAIL RUN GREENWOOD IN 46143	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BOEHN, KENNETH 6106 WHITETAIL RUN GREENWOOD IN 46143	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD PRIJATEL, FRANK 7321 PLAYERS CLUB DR CONCORD OH 44077	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T/D FRANK PRIJATEL 7321 PLAYERS CLUB DR CONCORD OH 44077	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DAWDY, DONALD 7129 SCARLET OAK ST MASON OH 45040	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S/D DIANE CORCELLI 25800 HICKORY BLVD #F-408 BONITA SPRINGS, FL 34134	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD ANTINORO, BEATRICE 23810 HICKORY BLVD # E 206 BONITA SPRINGS FL 34134	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BEATRICE ANTINORO 25810 HICKORY BLVD # E-206 BONITA SPRINGS, FL 34134	☒ Change ☐ Addition

CR2E037 (9/01)

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE FILE PRIJATEL 1/14/2002
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #