2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 21, 2006 8:00 am
Secretary of State
02-21-2006 90030 038 ****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

1st MOORE CR2E037 (10/05)

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

CHRISTOPHER
DAVIES, [redacted] N.
2375 TAMIAMI TRAIL NORTH
SUITE 308
NAPLES FL 34103

7. Name and Address of New Registered Agent

Name CHRISTOPHER N. DAVIES
Street Address (P.O. Box Number is Not Acceptable) 2375 TAMIAMI TRAIL NORTH
SUITE 308
City NAPLES FL Zip Code 34103

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE CHRISTOPHER N. DAVIES FEB. 6, 2006
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
Due By May 1, 2006

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

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP BIANCANIELLO, ANTHONY 181 HILLSIDE AVE. WILLISTON PARK NY 11596	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURER WILLIAM HEIDT 17 OLD FARM ROAD LITTLE SILVER, NJ 07739	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P SCHNEIDER, LINDA 8472 S SHOREVIEW DRIVE TRAFALGAR IN 46181	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	FRITZ NEUKAM 4604 E. LAKE SHORE DR. WONDER LAKE, IL 60097-8300	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD CORCELLI, DIANE 25800 HICKORY BLVD BONITA SPRINGS FL 34135	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HOPKINSON, THOMAS 137 MACLEAN AVE. TORONTO MYERS, CANADA m4e- jas	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LIVINGSTON, JAMES 6421 GRASSMERE DR. WESTERVILLE OH 43082	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: William Heidt