

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Nancy B. Murrain Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # **852132** (0)

1. Corporation Name:

SEAWIND REALTY CORPORATION

Principal Place of Business:

Mailing Address:

**3300 PGA BLVD.
SUITE 900
PALM BEACH GARDENS FL 33410
US**

**1201 ELM STREET
ATTN: TAX ADMINISTRATION DEPT.
DALLAS TX 75270**

APPROVED
AND
FILED

95 MAY -1 AM 9:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/10/1982		3a. Date of Last Report 05/01/1994	
4. FEI Number 75-1790575		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes. ☐ Yes ☒ No			

2. Principal Place of Business:		2b. Mailing Address:	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.		
22 City & State	27 City & State		
23 Zip	28 Country	29 Zip	30 Country
24	25	29	30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**THE PRENTICE HALL CORPORATION SYSTEM, INC
110 NORTH MAGNOLIA STREET
TALL. FL 32301**

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	85 Zip Code
	FL

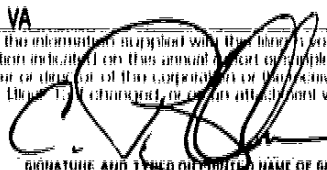
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	T	TITLE	T
NAME	SARNOWSKI, J. A.	NAME	Caselli, J. A.
STREET ADDRESS	3225 GALLOWS ROAD	STREET ADDRESS	3225 Gallow's Road
CITY, ST, ZIP	FAIRFAX VA	CITY, ST, ZIP	Fairfax, VA 22037
TITLE	PD	TITLE	
NAME	BROWN, D.	NAME	
STREET ADDRESS	4440 PGA BLVD., ROOM 601	STREET ADDRESS	
CITY, ST, ZIP	PALM BEACH GARDENS FL	CITY, ST, ZIP	
TITLE	AS	TITLE	
NAME	OLSON, C.T.	NAME	
STREET ADDRESS	1201 ELM ST.	STREET ADDRESS	
CITY, ST, ZIP	DALLAS TX	CITY, ST, ZIP	
TITLE	S	TITLE	
NAME	STEVENSON, P. A.	NAME	
STREET ADDRESS	3225 GALLOWS ROAD	STREET ADDRESS	
CITY, ST, ZIP	FAIRFAX VA	CITY, ST, ZIP	
TITLE	AS	TITLE	
NAME	BOOK, R. L.	NAME	
STREET ADDRESS	1201 ELM STREET	STREET ADDRESS	
CITY, ST, ZIP	DALLAS TX	CITY, ST, ZIP	
TITLE	D	TITLE	AS
NAME	ALLEN, D.E.	NAME	Sarnowski, J. A.
STREET ADDRESS	11911 FREEDOM DR.	STREET ADDRESS	3225 Gallow's Road
CITY, ST, ZIP	RESTON VA	CITY, ST, ZIP	Fairfax, VA 22037

SCHEDULE ATTACHED

14. I hereby certify that the information supplied was voluntarily furnished and does not qualify for the exemption stated in Section 119.02(1)(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. I am an officer or director of the corporation or its owner or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13. If changed, or when attached with an address.

SIGNATURE:  **C.T. Olson** Assistant Secretary 04/25/95 (214) 658-3183

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

852132

**OFFICERS AND DIRECTORS
SEWIND REALTY CORPORATION**

Directors Denoted by *

<u>Name</u>	<u>Title</u>	<u>Business Address</u>
O. R. Beaman*		(C)
W. D. Deihl*		(C)
R. R. Neyrey*		(F)
N. G. Greco*	Chairman	(C)
D. Brown*	President	(D)
G. T. La Fon, Jr.	Vice President	(G)
C. K. Schenk	Vice President	(E)
P. A. Stevenson	Secretary	(A)
R. L. Book	Assistant Secretary	(B)
H. R. Bradford	Assistant Secretary	(D)
J. H. Breed	Assistant Secretary	(C)
G. G. Garney	Assistant Secretary	(A)
J. J. Guilfoyle, Jr.	Assistant Secretary	(C)
C. T. Olson	Assistant Secretary	(B)
N. D. Peel*	Assistant Secretary	(C)
S. Honig	Assistant Secretary	(D)
J. A. Caselli	Treasurer	(A)
A. L. Cavaliere	Assistant Treasurer	(A)
R. B. Drumheller	Assistant Treasurer	(A)
A. M. Golden	Assistant Treasurer	(A)
J. A. Sarnowski	Assistant Treasurer	(A)
S. Honig	Controller	(D)

- (A) 3225 Gallows Road, Fairfax, VA 22037
- (B) 1201 Elm Street, Dallas, TX 75270
- (C) 11911 Freedom Drive, Reston, VA 22090-5065
- (D) 4440 PGA Boulevard, Room 601, Palm Beach Gardens, FL 33410-6582
- (E) 630 U.S. 1, Suite 104, North Palm Beach, FL 33408
- (F) 6263 North Scottsdale Road, Suite 200, Scottsdale, AZ 85250
- (G) 1755 S.E. Sailfish Point Blvd., Stuart, FL 34996

Note: All Officers' and Directors' terms are indefinite and expire when their successors are elected or chosen.

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Carolee B. Northing
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

DOCUMENT # **852814** (3)

1. Corporation Name
RANCH STORES, INC.

COPY - 1 MAY 9:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
**70 ENTERPRISE AVENUE
SECAUCUS NJ 07094**

Mailing Address
**70 ENTERPRISE AVENUE
SECAUCUS NJ 07094**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **05/07/1982** 3a. Date of Last Report **04/18/1994**

2. Principal Place of Business 21. State, Apt. #, etc. 22. City & State 23. Zip 24. Country	2a. Mailing Address 26. State, Apt. #, etc. 27. City & State 28. Zip 29. Country	4. FEI Number 72-0935210	Applied For ☐ Not Applicable
		5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
		6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
		8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent

**BERSIA, MARIE-FRANCE
451 ALTAMONTE AVE.
ALTAMONTE SPRINGS FL 32701**

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

(Signature of Registered Agent or Registered Agent Accepting)

(Signature of Registered Agent Accepting)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.1 NAME STREET ADDRESS CITY, ST, ZIP	PD LEFT, PETER A. 70 ENTERPRISE AVENUE SECAUCUS, NJ 07094	13.1 NAME STREET ADDRESS CITY, ST, ZIP	☐ Change ☐ Addition
12.2 NAME STREET ADDRESS CITY, ST, ZIP	VD POLESE, SAMUEL D. 70 ENTERPRISE AVENUE SECAUCUS, NJ 07094	13.2 NAME STREET ADDRESS CITY, ST, ZIP	☒ Change ☐ Addition
12.3 NAME STREET ADDRESS CITY, ST, ZIP	VSD JACKSON, MICHAEL J. 70 ENTERPRISE AVENUE SECAUCUS, NJ 07094	13.3 NAME STREET ADDRESS CITY, ST, ZIP	☐ Change ☐ Addition
12.4 NAME STREET ADDRESS CITY, ST, ZIP	VAS ABATE, MICHAEL A. 70 ENTERPRISE AVENUE SECAUCUS NJ	13.4 NAME STREET ADDRESS CITY, ST, ZIP	☐ Change ☐ Addition
12.5 NAME STREET ADDRESS CITY, ST, ZIP	H HEMINOVER, BARTON 70 ENTERPRISE AVENUE SECAUCUS NJ	13.5 NAME STREET ADDRESS CITY, ST, ZIP	☐ Change ☐ Addition
12.6 NAME STREET ADDRESS CITY, ST, ZIP		13.6 NAME STREET ADDRESS CITY, ST, ZIP	☐ Change ☒ Addition

**DIRECTOR
VERNA GIBSON
70 ENTERPRISE AVENUE
SECAUCUS, NJ 07094**

14. I hereby certify that the information supplied with this filing is voluntarily furnished, and that I am not liable for the exemption stated in Sections 119.037(3)(b), Florida Statutes. I further certify that the information was stated on this annual report or supplementary 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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or on an attachment with an address.

SIGNATURE:

Michael A. Abate
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**MICHAEL A. ABATE
VICE PRESIDENT**

4/26/95 (201) 866-3600
Date Telephone Number