Mailing Address

10885 SE FEDERAL HWY

HOBE SOUND FL 33455

2a. Mailing Address

City & State

Suite, Apt. #, etc.

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J11353

1. Corporation Name

Principal Place of Business.

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

10885 SE FEDERAL HWY HOBE SOUND FL 33455

21

22

23

Zip

SEA BREEZE MOBILE HOMEOWNERS', INC.

4	25 29	30			Personal Property Tax.		
9. Name and Address of Current Registered Agent				•	10. Name and Address of New Registe	red Agent	
CHARLES T SIMMONS C.P.A. 417 COCONUT AVE STE 1 #120 STUART FL 34996			81 82	Name Street	Address (P.O. Box Number is Not Acceptable)		
			83				
			84	City		FL 85 Zip C	ode.
office or re - agent. I ar	to the provisions of Sections 607.0502 and 6 segistered agent, or both, in the State of Floring familiar with, and accept the obligations of	da. Such change was autho	onzea by	tne coro	d corporation submits this statement for the purpos poration's board of directors. I hereby accept the a	e of changing its r ppointment as reg	registered istered
SIGNATURE	Signature, typed or printed name of registered agent and title	if applicable. (NOTE: Reg	gistered Agen	t signature r	required when reinstating) DATI	-	
12.	OFFICERS AND DIRI		13.		ADDITIONS/CHANGES TO OFFICERS	S AND DIRECTOR	RS IN 12
TITLE	PD	☑ DELETE	1.1 TITLE		PD	Change	☐ Addition
NAME	BERGERON, B.D.		1.2 NAME		Tuttle, Raymond		
STREET ADDRESS			1.3 STREET	ADDRESS	1	у 57	
CITY-ST-ZIP	HOBE SOUND FL		1.4 CITY-ST	r-zip	Hobe Sound, Fl 33455	<u> </u>	
TITLE	VD DELETE		2.1 TITLE		VD	☐ Change	Addition
NAME	HARTNETT, ROBERT		2.2 NAME		Harper, Arlene		
STREET ADDRESS	10885 SE FEDERAL HIGHWAY 94		2.3 STREET	ADDRESS	10885 S.E. Federal Hw	у 16	,
CITY-ST-ZIP	HOBE SOUND FL		2.4 CITY-S	T-ZIP	Hobe Sound, Fl 33455		
TITLE	SD	پت ∠	-3.1 TITLE -		SD-	Change	[_] Addition
NAME	HEUREUX, WARREN L.		3.2 NAME		Levinski, Marcella	,	
STREET ADDRESS	10885 SE FEDERAL HWY 5		3.3 STREET	ADDRESS	1 000) 5 1 2 1 2 3 3 5 3 5 5 7 7	64	
CITY-ST-ZIP	HOBE SOUND FL		3.4. CITY-S	T-ZIP	Hobe Sound, Fl 33455		T Addition
TITLE.			4.1 TITLE		,	☐ Change	☐ Addition
NAME	MORRISON, J		4.2 NAME		·		
STREET ADDRESS	10885 SE FEDERAL HWY 10		4.3 STREET	ADDRESS	8		
CITY-ST-ZIP	HOBE SOUND FL		4.4 CITY-S	T-ZIP		☐ Change	Addition
TITLE	TD	☐ DELETË	5.1 TITLE 5.2 NAME			☐ Griange	L.J AUGIDON
NAME	WESTERVELT, ART						
STREET ADDRESS	10885 SE FEDERAL HWY 67		5.3 STREET 5.4 CITY-S				
CITY-ST-ZIP	HOBE SOUND FL	☑ DELETE	6.1 TITLE	1-4P	D	[7] Change	Addition
TITLE	E beccie		6.2 NAME		υ Τ • Τ • Τ • · · · · · · · · · · · · · ·	₩ oumido	
NAME	KEELEY, LORRAINE	·		r address	L'Heureux, Warren	٠ ـ	
STREET ADDRESS	10885 SE FEDERAL HWY 120		6.4 CITY-S		10885 S. E. Federal H Hobe Sound, Fl 33455	wy 5	
CITY-ST-ZIP	HOBE SOUND FL	filing does not qualify for th	e evemnti	ion state	ed in Section 119 07/3\/i) Florida Statutes. I furthe	r certify that the in	formation
14. Thereby 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.							

Country

SIGNATURE:

FILED Apr 21, 1999 8:00 am Secretary of State 04-21-1999 90020 019 ***150.00



DO NOT WRITE IN THIS SPACE

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

3. Date Incorporated or Qualifed

5. Certificate of Status Desired

6. Election Campaign Financing

8. This corporation owes the current year Intangible

Trust Fund Contribution

04/28/1986 4. FEI Number

59-2702398