

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 25, 2004 8:00 am
Secretary of State

02-25-2004 90067 050 ***150.00

DOCUMENT # J11353 1. Entity Name SEA BREEZE MOBILE HOMEOWNERS', INC.					
Principal Place of Business 10885 SE FEDERAL HWY HOBE SOUND FL 33455 US			Mailing Address 10885 SE FEDERAL HWY HOBE SOUND FL 33455 US		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-2702398 Applied For ☐ Not Applicable ☐	
Zip	Country	Zip	Country	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CHARLES T SIMMONS C.P.A. 417 COCONUT AVE STE 1 #120 STUART FL 34996				7. Name and Address of New Registered Agent 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KOSTER, JERRY 10885 SE FED. HWY #13 HOBE SOUND FL 33455	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT ROBERT HARTNETT 10885 SE Fed. Hwy. #94 Hobe Sound FL 33455	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WISSINGER, CAROL 10885 SE FED. HWY. #123 HOBE SOUND FL 33455	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT WISSINGER, CAROL 10885 SE Fed. Hwy. #123 Hobe Sound FL 33455	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CAYE, ROBERT 10885 SE FED. HWY #36 HOBE SOUND FL 33455	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR TERRY PAVLIK 10885 SE Federal Hwy. #8 Hobe Sound FL 33455	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2VP PERREAULT, DON 10885 SE FED HWY., #65 HOBE SOUND FL 33455	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER JILL BRADY 10885 SE Federal Hwy. #81 Hobe Sound FL 33455	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1VP TRACEY, ROBERT 10885 SE FEDERAL HWY #68 HOBE SOUND FL 33455	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR EMILY REINECKE 10885 SE Federal Hwy. #17 Hobe Sound FL 33455	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WILSON, LOUISE 10885 SE FED. HWY. #52 HOBE SOUND FL 33455	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY BARRY WADSWORTH 10885 SE Fed. Hwy. #76 Hobe Sound, FL 33455	☐ Change ☒ Addition
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 607, 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: <u>Carol A. Wissinger</u> President 2/5/04 772-546-2300 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR <u>CAROL A. WISSINGER</u> PRESIDENT					