## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K17225

(9)

SEABREEZE RENTALS, INC.

FILED
May 06 1998 8:00am
Secretary of State



21         26         59-2872699           Sulte, Apt. #, etc.         Suite, Apt. #, etc.         5. Certificate of Status Desired         \$8.78           22         27         Fee           City & State         6. Election Campaign Financing         \$5.0	Applied For Not Applicable Additional Required D May Be d to Fees
PONTE VEDRA BEACH FL 32082 US  DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified 03/01/1988  2. Principal Place of Business 2. Principal Place of Business 2. Suite, Apt. #, etc. 2. Suite, Apt. #, etc. 2. Suite, Apt. #, etc. 2. City & State 2. City & State 2. City & State 2. City & State 2. Principal Place of Business 2. Principal Place of Business 3. Date Incorporated or Qualified 03/01/1988  4. FEI Number 5. Certificate of Status Desired 5. Certificate of Status Desired 7. Fee 7. Fee 8. This corporation owes or has paid the current year 7. Personal Property Tax due June 30. Tyes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 11. Name and Address of New Registered Agent 12. HAGLER, KENNETH D., ESQ. 13. Date Incorporated or Qualified 03/01/1988  4. FEI Number 5. Certificate of Status Desired 7. Fee 8. This corporation owes or has paid the current year 7. Personal Property Tax due June 30. Tyes 7. Personal Property Tax due June 30. Tyes 8. Name 9. Name and Address of New Registered Agent 10. Name and Address of New Registered Agent 11. Name and Address of New Registered Agent 12. Street Address (P.O. Box Number is Not Acceptable)	Additional Required  D May Be to Fees ntengible
US  DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  03/01/1988  2. Principal Place of Business 2a. Mailing Address 2b. Sulte, Apt. #, etc. 2c. Suite, Apt. #, etc. 2c. Suite, Apt. #, etc. 2c. City & State 2c. City & State 2c. City & State 2c. City & State 2c. Country	Additional Required  D May Be to Fees ntengible
3. Date Incorporated or Qualified  03/01/1988  2. Principal Place of Business  2a. Mailing Address  4. FEI Number  59-2872699  Sulte, Apt. #, etc.  Sulte, Apt. #, etc.  5. Certificate of Status Desired Fee  City & State  City & State  City & State  City & State  7. Country  28  Trust Fund Contribution Adde  Adde  Zip  Country  29  30  Personal Property Tax due June 30. Yes  9. Name and Address of Current Registered Agent  HAGLER, KENNETH D., ESO.  THREE PALM ROW  ST AUGUSTINE BEACH FL 32085-4385	Additional Required  D May Be to Fees ntengible
2. Principal Place of Business  2a. Mailing Address  25	Additional Required  D May Be to Fees ntengible
2. Principal Place of Business  2a. Mailing Address  25	Additional Required  D May Be to Fees ntengible
Sulte, Apt. #, etc.  27  City & State  City & State  28  Country  29  Country  20  R. This corporation owes or has paid the current year Personal Property Tax due June 30.  Yes  Personal Property Tax due June 30.  Yes  10. Name and Address of New Registered Agent  HAGLER, KENNETH D., ESO.  THREE PALM ROW  ST AUGUSTINE BEACH FL 32085-4365	Additional Required  D May Be d to Fees ntangible
Sulte, Apt. #, etc.  27  City & State  City & State  28  Country  29  Country  20  R. This corporation owes or has paid the current year Personal Property Tax due June 30.  Yes  Personal Property Tax due June 30.  Yes  10. Name and Address of New Registered Agent  HAGLER, KENNETH D., ESO.  THREE PALM ROW  ST AUGUSTINE BEACH FL 32085-4365	Required  D May Be to Fees  Intangible
27 Fee City & State City & State  28 Country 29 Country 29 Country 29 Country 29 Repeated Agent  HAGLER, KENNETH D., ESQ. THREE PALM ROW ST AUGUSTINE BEACH FL 32085-4365  Fee City & State City & State  6. Election Campaign Financing Trust Fund Contribution Adde Repeated Agent Personal Property Tax due June 30. Three Palm ROW ST AUGUSTINE BEACH FL 32085-4365	O May Be d to Fees ntangible
City & State  28  Zip Country 25 29 29 20 20 20 20 20 20 20 20 20 20 20 20 20	to Fees
Zip Country Zip Country 27 P Country Personal Property Tax due June 30. Yes  9, Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent  HAGLER, KENNETH D., ESQ. THREE PALM ROW ST AUGUSTINE BEACH FL 32085-4365	ntangible
Zip Country Zip Country 27 P Country Personal Property Tax due June 30. Yes  9, Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent  HAGLER, KENNETH D., ESQ. THREE PALM ROW ST AUGUSTINE BEACH FL 32085-4365	
9. Name and Address of Current Registered Agent  HAGLER, KENNETH D., ESQ.  THREE PALM ROW  ST AUGUSTINE BEACH FL 32085-4365  10. Name and Address of New Registered Agent  Name  Street Address (P.O. Box Number is Not Acceptable)	∐ No
HAGLER, KENNETH D., ESQ. THREE PALM ROW ST AUGUSTINE BEACH FL 32085-4365  81 Name Street Address (P.O. Box Number is Not Acceptable)	
THREE PALM ROW ST AUGUSTINE BEACH FL 32085-4365  Street Address (P.O. Box Number is Not Acceptable)	
ST AUGUSTINE BEACH FL 32085-4385	
84 City 85 Zi	Code
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 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	s registered
SIGNATURE Signature, typind or pointed name of registered agreal and let of applicable (NOTE: Registered Agent signature required when reinstating)  DATE	
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	RS IN 12
TITLE P DELETE 1.1 TITLE Change	
NAME QUICK, CHARLIE 12 NAME	
STREET ADDRESS 39 JEFFFERSON AVENUE 1.3 STREET ADDRESS	
CITY-ST-ZIP PONTE VEDRA BEACH FL 1.4 CITY-ST-ZIP	
TITLE VP DELETE 2.1 TITLE Change	☐ Addition
NAME QUICK, KRISTI M 22 NAME	
STREET ADDRESS 39 JEFFERSON AVE 2.3 STREET ADDRESS	
CITY-ST-ZIP PONTE VEORA BEACH FL 2.4 CITY-ST-ZIP	
	Addition
TITLE	
TITLE DELETE 3.11TITE Change	
NAME STREET ADDRESS 3.2 NAME 3.3 STREET ADDRESS	
NAME 32 NAME	Addition
NAME         3.2 NAME           STREET ADDRESS         3.3 STREET ADDRESS           CITY-ST-ZIP         3.4 CITY-ST-ZIP	Addition
NAME         32 NAME           STREET ADDRESS         33 STREET ADDRESS           CITY-ST-ZIP         34. CITY-ST-ZIP           TITLE         DELETE         4.1 TITLE         Change	☐ Addition
NAME	<b>□</b> Addition
NAME         32 NAME           STREET ADDRESS         33 STREET ADDRESS           CITY-ST-ZIP         34 CITY-ST-ZIP           TITLE         DELETE         4.1 TITLE           NAME         4.2 NAME	
NAME	
NAME	
NAME	
NAME	☐ Addition
NAME	☐ Addition
NAME	☐ Addition

14. 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 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 in the receiver or trusted 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.

- Mance alsolar goustil