FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUN 1. Corporation	MENT # /25309	(9)						
SEAMARK, INC.						V (
OLAWA!					4 (154 H) 100 H) 100 H) 100 H 100 H 100 H 100 H	ANI a naka anaha ahani ana hi a na h		
Principal Place of Business Mailing Address					C SECTION (MATERIAL SECTION SOLITOR SECTION SOLITOR SECTION SE	113 BIRIL ALBEI AIRIL AIRIL 1981		
5396 GULF BLVD. 5396 GULF BLVD. ST. PETERSBURG FL 33706-2301 ST. PETERSBURG FL 33706-2								
			16-2328					
					3. Date incorporated or Qualified 3a, D 01/19/1973	ate of Last Report 05/01/1996		
2. Principal Place of Business 2s. Mailing Address					4. FEI Number	Applied For		
21 26		 1			59-2264117	Not Applicable		
Suite, Apt. (Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional			
22	77510-01-2	27				Fee Required		
City & State)	City & State	-, '		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be		
23 Zip	Country	Zip	Country	v	Trust Fund Contribution	Added to Fees		
24	25 29 30		<u> </u>	or this corporation has againly in managine and or as rootes.				
	9. Name and Address of Current			······································	10. Name and Address of New Registered	Agent		
			81	Name	i e e e e e e e e e e e e e e e e e e e			
	T PROPERTIES, INC.	P 00h	82	Street /	Address (P.O. Box Number is Not Acceptable)			
10033 NINTH STREET NORTH, SECOND FLOOR				1				
ST. PETERSBURG FL 33706			83	<u> </u>				
					FL	85 Zip Code		
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register								
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.								
SIGNATURE					re required when reinstating) DATE			
12.	Signature, typed or printed name of registered agent and title II applicable. (NOTI OFFICERS AND DIRECTORS		13.	BUI BUN SIN A	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12		
TITLE	VP .	☐ DELETE 1.		****	VP	☐ Change ☐ Addition		
NAME	CRAMER, WILLIAM		1.2 NAME		Cramer, William 10033 9th Street North			
STREET ADDRESS	AT DESCRIPTION DOLLE			T ADDRESS	St. Petersburg, Florida	t. Petersburg, Florida		
CITY-ST-ZIP	ST PETERSBURG BCH.FL.			ST-ZIP	D	☐ Change ☐ Addition		
TITLE NAME			2.1 TITLE 2.2 NAME	}				
STREET ADDRESS	5396 GULF BLVD, 307			T ADDRESS	Siviter, Robert 10033 9th Street North St. Petersburg, Florida			
CITY-SI-ZIP	AT PETERONURA BALLEL			4City-St-ZIP St. Petersburg, Florida		a		
TITLE			3.1 TITLE		T	Change Addition		
NAME	***************************************		3.2 NAME		Parrino, Joseph 10033 9th Street North	arrino, Joseph 0033 9th Street North		
STREET ADDRESS				T ADDRESS	St. Petersburg, Florida	a		
C(TY-ST-ZIP	ST PETERSBURG BCH FL		3.4. CITY- 4.1 TITLE			Change Addition		
TITLE	P Murphy, John	-		4	Murphy, John	Thrustide Thyddirion		
NAME STREET ADDRESS			4.2 NAME	: Tadoress	10033 9th Street North St. Petersburg, Florid			
CITY-ST-ZIP	ST PETERSBURG BCH FL		4.4 CITY-5		St. Petersburg, Florid	a		
TITLE	D	DELETE	5.1 TITLE		D	Change Addition		
NAME			5.2 NAME		Camarinos, Brenda 10033 9th Street North			
STREET ADDRESS			5.3 STREET	T ADDRESS	St. Petersburg, Florid			
CITY - ST - ZIP	ST. PETERSBURG BEACH FL 5.		5.4 CITY -	ST-ZIP				
TITLE	· ·		6.1 TITLE		D	☐ Change ☐ Addition		
NAME			6.2 NAME		Siegle, Roy 10033 9th Street North			
STREET ADDRESS	5396 GULF BLVD #704		6.3 STREE	T ADDRESS	Ct Potorsburg Florid			

14. I do 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 suppliemental 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

FILED

May 20 1997 8:00am

Secretary of State