

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000002898

**Entity Name:** BABSEACLE INC

**Current Principal Place of Business:**

6949 BALBOA ISLAND CT  
DELRAY BEACH, FL 33446

**Current Mailing Address:**

2 SANDY HOLLOW LANE  
PORT WASHINGTON, NY 11050 US

**FEI Number:** 27-5051293

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

GERARD, SUZANNE L  
6949 BALBOA ISLAND CT  
DELRAY BEACH, FL 33446 US

*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.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title D  
Name LASKY, BRUCE A  
Address BAAN TAWANNA  
139 44 MOO 2, TAMBLO PADAD  
City-State-Zip: CHIANG MAI CHIANG MAI 50100

Title P  
Name MORRISH, WENDY J  
Address BAAN TAWANNA  
139 44 MOO 2, TAMBLO PADAD  
City-State-Zip: CHIANG MAI CHIANG MAI 50100

Title O  
Name MARTINEZ, MANUEL  
Address 26 PURDUE ROAD  
City-State-Zip: GLEN COVE NY 11542

Title D  
Name WALSH, CHRISTOPHER PHD  
Address 13 JETTY LANE  
City-State-Zip: MARYIBRNONG VIC 3032

Title D  
Name MIN, FOO YUET  
Address 10 COLLYER QUAY  
City-State-Zip: SINGAPORE SINGAPORE 049315

Title DIRECTOR  
Name THOMPSON, NICHOLAS DR.  
Address 121-123 YARRA ST  
ABBOTSFORD 4  
City-State-Zip: MELBOURNE 3067

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** WENDY MORRISH

**DIRECTOR**

**01/30/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date