FILED Feb 19, 1999 8:00 am

Secretary of State

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 175080

1. Corporation Name						
SEA GARDEN SALES COMPANY, INC.						R LOOKER HERKE HOOGE OKER FORDE KOEL OEDE KEEL OEDE KEEL ONDE DE D
Principal Place of Business Mailing Address						T (100/00) 1900 Etiti ont bi joint eallt nath naint aran aran aran aran eran ran
2325 UNIVERSITY BLVD. N. 2325 UNIVERSITY BLVD. N.						•
JACKSONVILLE FL 32211 JACKSONVILLE FL 32211						DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualifed
						08/31/1953
2. Principal Place of Business 2a. Mailing Address						4. FEI Number Applied For
21	26				59-0712226 Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional
22 27						ree Required
City & State City & State						6. Election Campaign Financing S5.00 May Be Added to Fees
Zip Country		Zip Country				8. This corporation owes the current year Intangible
Zip	25	29	30	,		Personal Property Tax.
24	9. Name and Address of Curren		[50]			10. Name and Address of New Registered Agent
or reality and reality of the realit				81	Name	·
WALKER, KERMIT K.			ļ	82	Street Addr	dress (P.O. Box Number is Not Acceptable)
2325 UNIVERSITY BLVD. N.				-		,
JACKSONVILLE FL 32211				83		
				84	City	85 Zip Code
					-	FL S E S
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors.						rporation submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered
agent. I a	m familiar with, and accept the obliga	tions of, Section 607.0505, Flo	rida Statu	⊥tes.	·	,
SIGNATURE		ANOTE AND IT	- Degistered	Acent	l eignature require	red when reinstating) DATE
12.	Signature, typed or printed name of registered agent and title if applicable. (NOTE OFFICERS AND DIRECTORS		13.	Agon	t algitaturo roquire	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P			ΠE		☐ Change ☐ Addition
NAME	CONNER, WILLIAM M.		1.2 NA	1.2 NAME		}
STREET ADDRESS	345 CALLE JACARANDA		. 1.3 ST	1.3 STREET ADDRESS		
CITY-ST-ZIP	BROWNSVILLE TX		1.4 Ci	1.4 CITY-ST-ZIP		
TITLE	S	☐ DELETE	2.1 TIT	2.1 TITLE		☐ Change ☐ Addition
NAME	CONNER, MARVIN G		2.2 NAME			
STREET ADDRESS	35 CALLE JACARANDA		2.3 STREET		ADDRESS	
CITY-ST-ZIP	BROWNSVILLE TX	- Delete		2. 4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE	VP	☐ DELET É		3.1 TITLE		Containing Systems 1
NAME	CONNER, MELLENA H.		3.2 NAME 3.3 STREET ADI		ADDRESS	
STREET ADDRESS	35 CALLE JACARANDA		3.3 STREET 3.4. CITY-S			}
CITY-ST-ZIP	BROWNSVILLE TX D	☐ DELETE	3.4. CI		1-219	☐ Change ☐ Addition
TITLE NAME	CONNER, MICHAEL DEAN		4. 2 N			
STREET ADDRESS	202 PARKVIEW CIR		4.3 STREET A		ADDRESS	
CITY-ST-ZIP	HARLINGEN TX 78550		4.4 CITY-ST-ZI			
TITLE		☐ DELETE	5.1 TITLE			☐ Change ☐ Addition
NAME			5.2 NAME			
STREET ADDRESS					ADDRESS	1
CITY-ST-ZIP			5.4 CITY-ST		T-ZIP	
TITLE			6.1 TI		-	☐ Change ☐ Addition
NAME			6.2 N			
STREET ADDRESS			6.3 S	IKEET	ADDRESS	

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 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.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP