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FILED

Feb 07 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Matham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 200568 (4)

1. Corporation Name  
THE SEA HORSE BATH AND TENNIS CLUB, INC.

Principal Place of Business

4001 N OCEAN BLVD  
DELRAY BEACH FL 33483

Mailing Address

4001 N OCEAN BLVD  
DELRAY BEACH FL 33483-7526



3. Date Incorporated or Qualified  
03/08/1957

3a. Date of Last Report  
02/27/1996

4. FEI Number

59-0807976

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

STANLEY, CAROL M.  
29 N.E. FOURTH AVENUE  
% MACMILLEN, STANLEY & PURDO  
DELRAY BEACH FL 33447

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip 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 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 607.0505, Florida Statutes.

SIGNATURE

*Samuel Hoopes*

Signature typed or printed name of registered agent and file if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1/10/97

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE  
NAME MCCALLUM, ROBERT  
STREET ADDRESS 4001 N. OCEAN BLVD  
CITY-ST-ZIP DELRAY BEACH FL

TITLE P ☐ DELETE  
NAME BUCKLEY, FRANCIS  
STREET ADDRESS 1322 BRUCHELL DR  
CITY-ST-ZIP FT LAUDERDALE FL

TITLE D ☐ DELETE  
NAME YOUNG, LEDLIE  
STREET ADDRESS 1101 S NEGLEY AVE  
CITY-ST-ZIP PITTSBURGH PA

TITLE D ☐ DELETE  
NAME ANDERSON, DORIS  
STREET ADDRESS 4001 N OCEAN BLVD  
CITY-ST-ZIP DELRAY BEACH FL

TITLE D ☐ DELETE  
NAME HOOPES SAMUEL  
STREET ADDRESS 4001 N. OCEAN BLVD.  
CITY-ST-ZIP DELRAY BEACH FL 33483

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 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.

SIGNATURE: *Samuel Hoopes*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/10/97

Date

Daytime Phone #

CR2E034 (9/96)