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Feb 11 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998

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

DOCUMENT # 200568   (4)
1. Corporation Name

THE SEA HORSE BATH AND TENNIS CLUB, INC.

Principal Place of Business	Mailing Address
4001 N OCEAN BLVD DELRAY BEACH FL 33483	4001 N OCEAN BLVD DELRAY BEACH FL 33483

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
03/08/1957

2. Principal Place of Business	**2a.** Mailing Address	4. FEI Number	Applied For
21	**26**	**59-0807976**	Not Applicable
Suite, Apt #, etc. **22**	Suite, Apt #, etc. **27**	5. Certificate of Status Desired ☐	**$8.75** Additional Fee Required
City & State **23**	City & State **28**	6. Election Campaign Financing ☐ Trust Fund Contribution	**$5.00** May Be Added to Fees
Zip **24**	Country **25**	Zip **29**	Country **30**	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ 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 _____
Signature typed or printed name of registered agent and title (if applicable)   (NOTE: Registered Agent signature required when reinstating)   DATE _____

12. OFFICERS AND DIRECTORS			**13.** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE (D)	MRS. Wood Ruff Johnson	☐ Change ☐ Addition
NAME	MCCALLUM, ROBERT		1.2 NAME	The wood lands	
STREET ADDRESS	4001 N. OCEAN BLVD		1.3 STREET ADDRESS	312 Clubhouse Road	
CITY-ST-ZIP	DELRAY BEACH FL		1.4 CITY-ST-ZIP	Washington, PA. 15301	
TITLE	~~O~~	☑ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	~~BUCKLEY, FRANCIS~~		2.2 NAME		
STREET ADDRESS	~~1322 BRUCHELL DR~~		2.3 STREET ADDRESS		
CITY-ST-ZIP	~~FT LAUDERDALE FL~~		2.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	YOUNG, LEOLIE		3.2 NAME		
STREET ADDRESS	1101 S NEGLEY AVE		3.3 STREET ADDRESS		
CITY-ST-ZIP	PITTSBURGH PA		3.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	ANDERSON, DORIS		4.2 NAME		
STREET ADDRESS	4001 N OCEAN BLVD		4.3 STREET ADDRESS		
CITY-ST-ZIP	DELRAY BEACH FL		4.4 CITY-ST-ZIP		
TITLE	P	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	HOOPES SAMUEL		5.2 NAME		
STREET ADDRESS	4001 N. OCEAN BLVD.		5.3 STREET ADDRESS		
CITY-ST-ZIP	DELRAY BEACH FL 33483		5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

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.

SIGNATURE: _____ President   1/3/97   561-276-8111

CR2E034 (10/97)