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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

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Jan 24 1997 8:00am

Secretary of State

Daytime Phone #

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 630256

(6)

SEAWOOD BUILDERS, INC. Principal Place of Business Mailing Address 820 E. HILLSBORO BLVD. 820 E. HILLSBORO BLVD. DEERFIELD BCH. FL 33441-3557 DEERFIELD BCH. FL 33441-0522 3. Date Incorporated or Qualified 3a. Date of Last Report 07/20/1979 04/23/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-1924383 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 28 23 Added to Fees Trust Fund Contribution Ζιρ Country Žip Country 8. This corporation has liability for intangible tax under s. 199.032, □ No Yes 24 25 29 30 Florida Statutes 10. Name and Address of New Registered Agent g. Name and Address of Current Registered Agent 81 Name MASI, BETTY M. 1617 S.E. 6TH ST. Street Address (P.O. Box Number is Not Acceptable) 82 **DEERFIELD BEACH FL 33441** 83 City 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 96/6 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Addition 1.1 TITLE Change TITLE MAHONEY, DANIEL J. 1.2 NAME NAME 255 NW 6TH AVE STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL** CITY-S1-7P 1.4 CITY-ST-ZIP DELETE Change Addition THUE 2.1 TITLE MASI. EDWARD NAME 2.2 NAME 1617 S.E. 6TH STREET 2.3 STREET ADDRESS STREET ADDRESS DEERFIELD BCH. FL 2. 4 CITY - ST - ZIP CITY-ST-ZIP DELETE 3.1 TITLE Change Addition TITLE MASI, BETTY M. 3.2 NAME 1617 S.E. 6TH STREET STREET ADDRESS 3.3 STREFT ADDRESS DEERFIELD BCH. FL 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition THILE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY - ST - ZiP □ DELETE ☐ Change Addition TITLE 51 TITLE NAME 5.2 NAME STREET ADDRESS **53 STREET ADDRESS** 54 CiTY-ST-ZIP City-St-Zip DELETE 61 TITLE Change Addition TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 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.