

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 28, 2000 8:00 am
Secretary of State

01-28-2000 90162 029 ***150.00

DOCUMENT # 688792

1. Entity Name

SEA GALLERY STORES, INC.

Principal Place of Business

782 QUIETWATER BEACH ROAD
 PENSACOLA BEACH FL 32561
 US

Mailing Address

782 QUIETWATER BEACH ROAD
 PENSACOLA BEACH FL 32561-2001
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2058088

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

ELBERT, BONNIE S
215 PANFERIO DRIVE
PENSACOLA BEACH FL 32561

7. Name and Address of New Registered Agent

Name **James E. Elbert**

Street Address (P.O. Box Number is Not Acceptable)
124 NANDINA RD

City **Gulf Breeze** FL Zip Code **32561**

8. 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

James E. Elbert

James E. Elbert President

DATE

1-20-00

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

(NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	ELBERT, BONNIE S.	
STREET ADDRESS	215 PANFERIO DRIVE	
CITY-ST-ZIP	PENSACOLA BEACH FL	
TITLE	ST	<input checked="" type="checkbox"/> Delete
NAME	ELBERT, BONNIE S.	
STREET ADDRESS	215 PANFERIO DRIVE	
CITY-ST-ZIP	PENSACOLA BEACH FL	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	ELBERT, JAMES E.	
STREET ADDRESS	215 PANFERIO DRIVE	
CITY-ST-ZIP	PENSACOLA BEACH FL	
TITLE	S	<input type="checkbox"/> Delete
NAME	COLLINS, REBECCA	
STREET ADDRESS	3359 GREENBRIAR CIRCLE	
CITY-ST-ZIP	GULF BREEZE FL 32561	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JAMES E. ELBERT	
STREET ADDRESS	124 NANDINA RD	
CITY-ST-ZIP	GULF BREEZE FL 32561	
TITLE	V P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BONNIE S. ELBERT	
STREET ADDRESS	124 NANDINA RD.	
CITY-ST-ZIP	Gulf Breeze, FL 32561	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	ST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

James E. Elbert
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

James E. Elbert 1-20-00 (850)916-2806

CR2E034 (9/99)