FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Corporanor	MENT # 690392 PH SEEGERS, INC.	(6)			
Principal Place of Business Mailing Address 10788 \$ TROPICAL TRAIL 10788 \$ TROPICAL TR		Mailing Address 10768 S TROPICAL TRAIL		T THE REAL WATER BOOKING BRIDGE THE PROPERTY OF THE PROPERTY O	Dieir Gibri ardi) dibi: 6:511 Brhit ;adr
MERRITT ISLAND FL 32952 MERRITT ISLAND FL 32952			-6830		
				3. Date Incorporated or Qualified 05/26/1981	3a. Date of Last Report 02/19/1996
2. Principal Pi	face of Business	2a. Mailing Address		4. FEI Number	Applied For
21 3807	40th ST.	26		59-2146028	Not Applicable
Suite, Apt #, etc 22 KENOSIAR, WI.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	0	City & State		8. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
26 24 5314	Country	Zip	Country	8. This corporation has liability for	
24 17 -71 -7	9. Name and Address of Current	29	30	Florida Statutes 10. Name and Address of New Re	
SEE	GERS, L JOSEPH		81 Name P		
10768 S TROPICAL TRAIL 82			82 Street Add	ERRY+ ASSOCIATION THE STATE OF	ole)
	RRIT ISLAND, FLORIDA		83	S. PATRICK DR.	# 60 °
329!	52		SATE	ELLITE BEACH,	
			B4 City,		FL 85 Zip Code 37
office or r	to the previsions of Sections 607,0502 eg stered agent or both, in the State o ni familiar برانسر and accept the obligat	if Florida. Such change was at	uthorized by the cornor:	rporation submits this statement for the pation's board of directors. I hereby accept	purpose of changing its registered
SIGNATURE	1 Journ Borns	/			4/17/97
12.	Signature, specifier printing area of registered as in OFFICERS AND		: Registered Agent signature req	ulred when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE CERS AND DIRECTORS IN 12
TrT: F	PD	DELETE	1 1 TITLE		Change Addition
NAME	SEEGERS, L JOSEPH		1.2 NAME		
STREET ADOPESS	10768 S TROPICAL TRAIL		1.3 STREET ADDRESS		
CHY-ST 7IP TULF	MERRITT ISLAND, FL 00000	DEVETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition
NAME	vs Seegers, Muriel o	_ order	2.2 NAME		El custude El vaguado
STHEFT ADDRESS	10768 S TROPICAL TRAIL		2.3 STREET ADDRESS		
CHY-ST-7IP	MERRITT ISLAND, FL 00000		2. 4 CITY - S1 - ZIP		
THE		DELETE	3.1 TITLE	•	Change
NAME			3.2 NAME		
STREET ADORESS			3.3 STREET ADDRESS 3.4. CITY+ST-ZIP		
Of YEST-701		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CHY-ST-ZIP	**************************************	T britte	4.4 CHY-ST-ZIP		Chappa Addition
THEE		☐ DELETE	5.1 TITLE		Change Addition
NAME STREET ADORESS			5.2 NAME 5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP	·	İ
Title		DELETE	6.1 TITLE		☐ Change ☐ Addition
*iAME			6.2 NAME ·		
SPIELT ADDRESS			6.3 STREET ADDRESS		

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:

414-653-9695

FILED

Apr 24 1997 8:00am

Secretary of State