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Apr 22, 1999 8:00 am
Secretary of State

04-22-1999 90141 031 ****61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 739375					
1. Corporation Name SEAWATCH OF MARCO, INC.					
Principal Place of Business 209 S. COLLIER BLVD. MARCO ISLAND FL 33837 US			Mailing Address 209 S. COLLIER BLVD. MARCO ISLAND FL 33837 US		

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 545911 - 90052 - 29



2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 34145 25 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 34145 30 Country		3. Date Incorporated or Qualified 06/20/1977 4. FEI Number 59-1848654 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required 6. Election Campaign Financing ☐ \$5.00 May Be Added to Fees	
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9. Name and Address of Current Registered Agent CAMPOSANO, EDWARD 209 S. COLLIER BLVD. MARCO ISLAND FL				10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL 34145	
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, 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	P	1.1 TITLE	☐ Change ☐ Addition
NAME	DAUGHERTY, ROBERT	1.2 NAME	
STREET ADDRESS	207 S COLLIER BLVD	1.3 STREET ADDRESS	
CITY-ST-ZIP	MARCO ISLAND FL	1.4 CITY-ST-ZIP	
TITLE	S	2.1 TITLE	☐ Change ☐ Addition
NAME	PLUCENIK, EDWARD	2.2 NAME	
STREET ADDRESS	1109 CANTERBURY RD	2.3 STREET ADDRESS	
CITY-ST-ZIP	MILFORD DE	2.4 CITY-ST-ZIP	
TITLE	VP	3.1 TITLE	☐ Change ☒ Addition
NAME	VIPIANO, FRANK	3.2 NAME	
STREET ADDRESS	60 RIDGE DR	3.3 STREET ADDRESS	
CITY-ST-ZIP	PLAINVIEW NY	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	☐ Change ☐ Addition
NAME	NUGENT, FRANK	4.2 NAME	
STREET ADDRESS	229 S COLLIER BLVD	4.3 STREET ADDRESS	
CITY-ST-ZIP	MARCO ISLAND FL 34145	4.4 CITY-ST-ZIP	
TITLE	TD	5.1 TITLE	☐ Change ☐ Addition
NAME	MOGAN, JAMES	5.2 NAME	
STREET ADDRESS	201 S COLLIER BLVD	5.3 STREET ADDRESS	
CITY-ST-ZIP	MARCO ISLAND FL	5.4 CITY-ST-ZIP	
TITLE		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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address, with all other like empowered.

SIGNATURE: X

Signature Required
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/99 344-3200
 Date Daytime Phone #

CR2E037 (11/98)