FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION
*ANNUAL REPORT
1995

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

APPROVED
AND
FILED

95 MAY -1 AM 9:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 810346 (7)

1. Corporation Name

THE SEA CLUB

Principal Place of Business	Mailing Address
1221 HILLSBORO MILE HILLSBORO BEACH FL 33062	1221 HILLSBORO MILE HILLSBORO BEACH FL 33062

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/09/1955
3a. Date of Last Report: 03/08/1994
4. FEI Number: 59-0754805 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip
24
Country
25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip
29
Country
30

9. Name and Address of Current Registered Agent

MCCORMACK, EDWARD J
1221 HILLSBORO MILE Apt. 48B
HILLSBORO BCH FL 33062

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: ... (typed 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	11 TITLE	☐ Change ☐ Addition
NAME	SCHAEFER, JOHN	12 NAME	
STREET ADDRESS	1221 HILLSBORO MILE Apt.46B	13 STREET ADDRESS	
CITY-ST-ZIP	HILLSBORO BCH, FL 00000	14 CITY-ST-ZIP	
TITLE	S	21 TITLE	☐ Change ☐ Addition
NAME	D'ARCY, STUART Apt. 18C	22 NAME	
STREET ADDRESS	1221 HILLSBORO MILE	23 STREET ADDRESS	
CITY-ST-ZIP	HILLSBORO BCH, FL 00000	24 CITY-ST-ZIP	
TITLE	T	31 TITLE	☐ Change ☐ Addition
NAME	LINDSTROM, DEAN Apt. 8B	32 NAME	
STREET ADDRESS	1221 HILLSBORO MILE	33 STREET ADDRESS	
CITY-ST-ZIP	HILLSBORO BCH, FL 00000	34 CITY-ST-ZIP	
TITLE	VP	41 TITLE	☐ Change ☐ Addition
NAME	SCHAARDT, W. T D	42 NAME	
STREET ADDRESS	1221 HILLSBORO MILE Apt. 21A	43 STREET ADDRESS	
CITY-ST-ZIP	HILLSBORO BEACH FL	44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME	McCormack, Edwdrd J. D	52 NAME	
STREET ADDRESS	1221 Hillsboro Mile Apt. 48B	53 STREET ADDRESS	
CITY-ST-ZIP	Hillsboro Beach, Fl. 33062	54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME	Lazowski, Alice D	62 NAME	
STREET ADDRESS	1221 Hillsboro Mile Apt. 28C	63 STREET ADDRESS	
CITY-ST-ZIP	Hillsboro Beach, Fl. 33062	64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: Dean R. Lindstrom, Treasurer 4/14/95 305-428-0688
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

000002