2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 810346

FILED
May 03, 2000 8:00 am
Secretary of State
05-03-2000 90065 028 ****61.25

1. Entity Name

THE SEA CLUB

Principal Place of Business	Mailing Address
1221 HILLSBORO MILE HILLSBORO BEACH FL 33062	1221 HILLSBORO MILE HILLSBORO BEACH FL 33062-1435

DO NOT WRITE IN THIS SPACE

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 59-0754805 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MORRISON, JOHN F JR 1221 HILLSBORO MILE 17B HILLSBORO BCH FL 33062	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees	**Make Check Payable to Department of State**

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P LOCKE, ROBERT 1221 HILLSBORO MILE VILLA 9 HILLSBORO BEACH FL 33062	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Ronald Boutet 551 Ferry RD Saco ME 04072	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S LAZOWSKI, ALICE 1221 HILLSBORO MILE APT 28C HILLSBORO FL 33062	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD PAT Perrelli 253 Braeside Dr. Hamden CT 06514	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPT MORRISON, JOHN F JR 1221 HILLSBORO MILE, #17B HILLSBORO BEACH FL 33062	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T FOLIN, ROBERT 1221 HILLSBORO MILE APT 41A HILLSBORO BEACH FL 33062	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP DELP, MARGARET 1221 HILLSBORO MILE APT 29C HILLSBORO BEACH FL 33062	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SHELTON, PAUL 1221 HILLSBORO MILE APT 19C HILLSBORO BEACH FL 33062	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/99)

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED VP 4/20/00
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #