

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # **838888** (6)  
1. Corporation Name  
**SEARIVER MARITIME FINANCIAL HOLDINGS, INC.**

FILED  
97 APR 11 AM 11:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business  
**800 BELL ST., ROOM 493  
P.O. BOX 392  
HOUSTON TX 77002**

Mailing Address  
**800 BELL ST., RM 323  
P. O. BOX 392  
HOUSTON TX 77001-0392  
US**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324**

*Corporation Service Company*

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 **800002142248--2**

**-04/14/97--01094--009**

**\*\*\*\*165.00 \*\*\*\*165.00**

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

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 ☒ DELETE

NAME **PD  
TATKON, CAROL C.**  
STREET ADDRESS **800 BELL STREET**  
CITY-ST-ZIP **HOUSTON TX**

TITLE ☐ DELETE

NAME **AS  
LYNCH, JOSEPH G**  
STREET ADDRESS **800 BELL ST**  
CITY-ST-ZIP **HOUSTON TX**

TITLE ☒ DELETE

NAME **S  
NOLAN, PETER A.**  
STREET ADDRESS **800 BELL STREET**  
CITY-ST-ZIP **HOUSTON TX**

TITLE ☒ DELETE

NAME **VPTD  
PENROSE, STEPHEN B. L.**  
STREET ADDRESS **800 BELL STREET**  
CITY-ST-ZIP **HOUSTON TX**

TITLE ☐ DELETE

NAME **VP  
HINSHAW, DAVID L.**  
STREET ADDRESS **800 BELL STREET**  
CITY-ST-ZIP **HOUSTON TX**

TITLE ☐ DELETE

NAME **D  
ALEXANDER, BOBBY W.**  
STREET ADDRESS **800 BELL STREET**  
CITY-ST-ZIP **HOUSTON TX**

1.1 TITLE ☐ Change ☒ Addition

1.2 NAME **PD  
Rosenberg, Rich A.**  
1.3 STREET ADDRESS **800 Bell Street**  
1.4 CITY-ST-ZIP **Houston, TX 77002**

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME **S  
Duenser, Ruth E.**  
3.3 STREET ADDRESS **800 Bell Street**  
3.4 CITY-ST-ZIP **Houston, TX 77002**

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME **VPTD  
Bass, Freda W.**  
4.3 STREET ADDRESS **800 Bell Street**  
4.4 CITY-ST-ZIP **Houston, TX 77002**

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 18, 1997 (713) 656-1807

Date

Daytime Phone #

CR2E034 (9/96)