FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT #
1. Corporation Name F95000000820 (9)

S.E.A. MISSION, INCORPORATED

Principal Place of Business Maiting Address

FILED Mar 03 1997 8:00am Secretary of State



1201 WILSON AVENUE PENSACOLA FL 32507 US		1201 WILSON AVENUE PENSACOLA FL 32507-2242 US				3. Date Incorporated or Qualified 02/20/1995 01/25/1996				
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		T	Applied For	
		26				13-3038201		$\Box\Box$	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State	e	City & State				6. Election Campaign Financing Trust Fund Contribution			May Be	
Zip 24	25 29 30			ſy			poration has liability for Intangible tax under s. 199.032, statutes Yes 🔣 No			
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Reg	latered A	gent		
			В	Nam	0					
SUMRALL, DENTON DR. 1201 WILSON AVENUE			8	2 Stree	t Addres	Address (P.O. Box Number is Not Acceptable)				
PENSAC	OLA FL 32507		8	3						
			8	City			FL	85 Zi	p Code	
agent. Fai	egistered agent, or both, in the State im familiar with, and accept the obligation Signature, typed or printed name of registered agen	of Florida. Such change was tions of, Section 617.0503, F	authorized i Iorida Statuti ITE: Regislered A	oy the co es.	orporatio	ation submits this statement for the pin's board of directors. I hereby acceptions when reinstating)	t the appo	pintment a	as registered	
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFIC	ERS AND			
TITLE	D DEFORE OF OR	☐ DELETE	1.1 TITLE					Change	e 🔲 Addition	
NAME STREET ADORESS	SEAGLE, CECIL 1230 HENDRICKS AVENUE		1.2 NAME							
CITY-ST-ZIP	JACKSONVILLE FL		1.3 STRE	TADORES	•					
TITLE	D	DELETE	2.1 TITLE					Change	e Addition	
NAME	STEWART, DANIEL	-	2.2 NAME			•				
STREET ADDRESS	111 JACQUELYN WAY		2.3 STRE	T ADDRESS	3					
CITY-ST-ZIP	PENSACOLA FL		2. 4 CITY	-ST-ZIP						
TITLE	DST	☐ DELETE	3.1 TITLE				1	Change	e Addition	
NAME	CALVERT, FINIS		3.2 NAME							
STREET ADDRESS	2627B CREIGHTON RD.		1	T ADDRESS	3					
CITY-ST-ZIP TITLE	PENSACOLA FL 32504	DELETE	3.4. CITY 4.1 TITLE		-			Chana	Addition	
NAME	TURNER, PRINCE	☐ pritit	4.1 IIILE 4.2 NAM				'	Change	e L Addition	
STREET ADDRESS	5010 DAUPHIN ISLAND PKWY	1.		- Et address	,					
CITY-ST-ZIP	MOBILE AL 33805-9724		4.4 CITY-							
TITLE	P	☐ DELETE	5.1 TITLE		P			Change	Addition	
NAME	SUMRALL, DENTON DR.		5.2 NAME		Bu	nrall, Denton Dr I wilson Avenue	,	•		
STREET ADDRESS	313 E PALMETTO AVE		5.3 STAE	T ADDRESS	120	1 wilson Avenue				
CITY-ST-ZIP	PENSACOLA FL 32507		5.4 CITY-		Fee	BACOLA, FL 325	07			
TITLE	V OLIMBALL OFFICE	DELETE	6.1 TITLE		Y	. 11 (0 - 1)	J	Change	Addition	
NAME OXDOCE ADDRESS	SUMRALL, CAROL		6.2 NAME			mrall, Carol				
STREET ADDRESS	313 E PALMETTO AVE			T ADDRESS		of Wilson Avenue	. ~			
CITY-ST-ZIP	PENSACOLA FL 32507		6.4 CITY	ST-ZIP	I re	USACOLA, Flu 325	01			

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 convoration or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name 1 am an officer or director of the corporation or appears in Block 12 or Block 13 if changed, or

SIGNATURE: