

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)**

**PROFIT
CORPORATION
ANNUAL REPORT
1996**



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

DOCUMENT # G18286 (6)
1. Corporation Name: **SEA GULL CONSTRUCTION & DEVELOPMENT, INC.**



Principal Place of Business: **315 COMMERCE WAY
P.O. BOX 1384 (33468)
JUPITER FL 33458**
Mailing Address: **315 COMMERCE WAY
P.O. BOX 1384 (33468)
JUPITER FL 33458**

2. Principal Place of Business: 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country
28. Mailing Address: 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30

3. Date Incorporated or Qualified: **01/10/1983**
3a. Date of Last Report: **08/03/1995**
4. FEI Number: **59-2260748**
5. Certificate of Status Due: ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing: ☐ \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 193.032 Florida Statutes: ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**SMGLIA, JOE
17537 DOGWOOD TRAIL
JUPITER FL 33458**

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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of Registered Agent or Person Authorized to Appoint

Signature of Registered Agent or Person Authorized to Appoint

12. OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP
PD SMGLIA, JOE 17537 DOGWOOD TRAIL JUPITER FL
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP
21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP
31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP
41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP
51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP
61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP

14. I do hereby certify that the information supplied within this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(2)(b) Florida Statutes. I further certify that the information included 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. I am an officer or director of this corporation or the registered 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 or in an attachment with an address.

SIGNATURE:

SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/6/96 561-7471968

CR2E034 (3/96)