## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## **Secretary of State DOCUMENT # H08035** 01-26-2004 90021 012 \*\*\*150.00 1. Entity Name SEA TREK REALTY, INC. Principal Place of Business Mailing Address 855 ZUST STREET 855 ZIST STREET STF. 1 STF 1 **E**L 32960 VERO BEACH VERO BEACE FL 32960 2. Principal Place of Business 3. Mailing Address 1630 Club Drive 1.630 Club Drive Suite, Apt. #, etc. 01232004 Cha-P CR2E034 (10/03) City & State 4. FEI Number Applied For Vero Bch. Vero Bch, 59-2427169 Not Applicable <sup>Zip</sup> 32963 Country Country \$8.75 Additional 5. Certificate of Status Desired USA 32963 USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name- - -GARTNER, NED M. 945 TULIP LANE Street Address (P.O. Box Number is Not Acceptable) VERO BEACH, FL 32963 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered effect or registered agent, cypoth, in the State of Florida. I am familiar with, and accept -23-04 Museuse A Hautho Signature, typed or printed name of registered agent and title if applicable SIGNATURÉ. (NOTE: Reg 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE ☐ Change Addition GARTNER, NED M. NAME STREET ADDRESS 945 TULIP LANE STREET ADDRESS CITY-ST-ZIP VERO BEACH, FL CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME GARTNER, LORRAINE S. 945 TULIP LANE STREET ADDRESS STREET ADDRESS VERO BEACH, FL CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition MAME NAME STREET ADDRESS STREET ADDRESS - د:CITY-ST - ZIP CITY-ST-ZIP. ☐ Change TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 comporation or the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if charged, or on an attachment with an address, with all other tips empowered. 772-

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Jan 26, 2004 8:00 am