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

*PROFIT* CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H14380

(0)

SEACROFT, INC.

		ι,

FILED
Jan 26 1998 8:00am
Secretary of State



Principal Place of Business Mailing Address						
7744 GARDNER DR #201 7744 GARDNER DR #201		ŧ				
NAPLES FL 34109		NAPLES FL 34109				
US		US				DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified		
9 Principal F	Place of Business	Se Mailing Address				07/30/1984 4. FEI Number Applied For
	lace of business	2a. Mailing Address				
Suite, Apt.	# etc	Suite, Apt. #, etc.	26 Suite Apt # etc			59-2438259   Not Applicable
22	7F, G.O.	27	<b>–</b>			5. Certificate of Status Desired Fee Required
City & Stat	е	City & State				6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution	
Zip	Country	Zip	Cou	intry		8. This corporation owes or has paid the current year Intangible
24	25	29	30			Personal Property Tax due June 30. 🔲 Yes 🗶 No
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Registered Agent
MA	YER, F E			81	Name	
	44 GARDNER DR #201		82		Street Ari	dress (P.O. Box Number is Not Acceptable)
	PLES FL 34109				Olicel Ad	ratess (1.0. box Mariber is Not Acceptable)
	. 220 12 01100			83		
				84	City	<b>85</b> Zip Code
					-	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statu	les, the at	oove	-named co	orporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered
agent. La	m familiar with, and accept the obligat	ions of, Section 607.0505, Fi	orida Stat	utes	rus corbor	ation's board of directors, it hereby accept the appointment as registered
SIGNATURE						
	Signature, typed or printed name of registered agent			d Age	nt signature req	quired when reinstating) DATE
12.	OFFICERS AND	DELETE	13.	T) F		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TIFLE	PD	T Dereve	1.1 71			E Crange I Addaton
NAME MAYER, F. E.			1.2 NAME			
STREET ADDRESS 7744 GARDNER DR #201			1.3 STREET ADDRESS			
CITY-ST-ZIP	NAPLES FL 34109	FT DESETE	1.4 CF		- ZIP	Ohanna D Markan
TITLE	VD	DELETE		2.1 TITLE		L Change Addition
NAME FREDRICKSON, DAVID M			2.2 N			
STREET ADDRESS 11546-60TH STREET NORTH		_	2.3 STREET ADD		ADDRESS	
CITY-ST-ZIP ROYAL PALM BEACH FL 33411			2. 4 CITY-ST-Z		7-ZIP	
TITLE	S	☐ DELETE	3.1 TII	3.1 TITLE		☐ Change ☐ Addition
NAME	STEELE, KATHRYN MAYER		3.2 NA	3.2 NAME		
STREET ADDRESS 10326 SANDY HOLLOW LANE		3.3 ST	3.3 STREET ADDRESS			
CITY-ST-ZIP BONITA SPRINGS FL - 33 923		3.4. CI	3.4. CITY - ST - ZIP			
TITLE	Т	☐ DELETE	4.1 TIT	TLE		Change Addition
NAME	MAYER, GLORIA P		4. 2 N/	AME		
STREET ADDRESS 7744 GARDNER DR #201		4.3 ST	4.3 STREET ADDRESS			
City - St - Zip	NAPLES FL 34109		4,4 Ci1	TY - \$T	-ZIP	
TITLE		☐ DELETE	5.1 TIT	TLE	1	Change Addition
NAME			5.2 NA	ME	1	
STREET ADDRESS			5.3 ST	REET /	ADDRESS	
CITY-ST-ZIP			5.4 CIT	TY-\$T	- ŽIP	
TITLE		DELETE	6.1 TIT	ΙŒ		Change Addition
NAME			5.2 NA	ME		
STREET ADORESS			6.3 ST	REET /	ADDRESS	
CITY-ST-ZIP			6.4 CIT	TY-ST	- ZIP	

14. 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 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: F.E. MAYER IRE TOMATO

1-12-1998

941-592-5053