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.) FLORIDA DEPARTMENT OF STATE **PROFIT** CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT DIVISION OF CORPORATIONS 1996 (2)**DOCUMENT #** H15005 THE SEABROOK GROUP, INC. Mailing Address Principal Place of Business 300 LEJEUNE DRIVE 300 LEJEUNE DRIVE MERRITT ISLAND FL 32953 MERRITT ISLAND FL 32953 3a. Date of Last Report 3. Date Incorporated or Qualified 04/25/1995 08/02/1984 Applied For 4. FEI Number 2a. Mailing Address 2. Principal Place of Business Not Applicable 59-2449308 26 21 \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Suite, Apt #, etc Fee Required 27 22 \$5.00 May Be 6. Election Campaign Financing City & State City & State Added to Fees Trust Fund Contribution 28 23 8. This corporation has liability for intangible tax under s 199.032, Country Zip Florida Statutes Yes No.

10. Name and Address of New Registered Agent Country Zip 30 29 24 9. Name and Address of Current Registered Agent Name TATE, MARK Street Address (P.O. Box Number is Not Acceptable) 300 LE JEUNE DR. **MERRITT ISLAND FL 32953** 85 Zip Code 84 City and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered upon of Section 60, 0505, Florida Statutes. 11. Pursuant to the prov office or registered agent. I am familiar ni plact wher reinst ding) DAR SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. OFFICERS AND DIRECTORS 8 12. DELETE 1.1 Tille TITLE 1.2 NAME TATE, MARK NAME 1.3 STREET ADDRESS 300 LEJUNE DRIVE STREET ADDRESS 14 CiTY - ST-7iP MERRITT ISLAND FL Change \_\_\_\_ Addition CITY-ST-ZIP DELETE 21 THLE VP THLE GALL, JOHN, JR. NAME 2.3 STREET ADDRESS 300 LEJUNE DRIVE STREET ADDRESS 2 4 CITY - ST-ZIP MERRITT ISLAND FL Change Addition CITY-ST-ZIP DELETE 3 1 TITLE TITLE NAME 3 3 STREET ADDRESS STREET ADDRESS 34 CITY-ST-ZIP Change Addition CITY-ST-ZIP DELETE 4.1 ItTLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4 4 CITY - ST - ZIP Change Addition CITY-ST-ZIP DELETE 51 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CHTY - \$1 - ZIP Change \_\_\_ Addition CITY - ST - ZIP DELETE 6 1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS hation supplied with this filing is yountarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes I indigated on this annual/epory or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if I indigated on this annual/epory or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if I indigated or this annual/epory or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if

attachment with an address

MARK

CITY-ST-ZIP

14. I do hereby certify that the information further certify that the information made under oath, that I are an a that my name appears in the company of th

SIGNATURE: