

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 04, 1999 8:00 am
Secretary of State

03-04-1999 90150 030 ***158.75

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DOCUMENT # H31681

1. Corporation Name
SEACOAST COMMUNICATIONS GROUP INC.



Principal Place of Business
2719 S. PONTE VEDRA BLVD.
PONTE VEDRA FL 32082
US

Mailing Address
2719 S PONTE VEDRA BLVD
PONTE VEDRA FL 32082
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/27/1984

2. Principal Place of Business

21 **3628 MAMARONECK COURT**

Suite, Apt. #, etc.

22

City & State

23 **GREEN COVE SPRINGS, FL**

Zip

Country

24 **32043**

25

U.S.A.

2a. Mailing Address

26 **3628 MAMARONECK COURT**

Suite, Apt. #, etc.

27

City & State

28 **GREEN COVE SPRINGS, FL**

Zip

Country

29 **32043**

30

USA

4. FEI Number

59-2474871

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

WHITE, GEORGE J.
2719 S PONTE VEDRA BLVD.
PONTE VEDRA FL 32082

10. Name and Address of New Registered Agent

81 Name **WHITE, GEORGE J. JR.**

82 Street Address (P.O. Box Number is Not Acceptable)
3628 MAMARONECK COURT

83

84 City **GREEN COVE SPRINGS**

FL

85 Zip Code
32043

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

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☒ DELETE
NAME **WHITE, GEORGE J., JR**
STREET ADDRESS **2719 S. PONTE VEDRA BLVD.**
CITY-ST-ZIP **PONTE VEDRA FL**

TITLE **ST** ☐ DELETE
NAME **JONES, JEAN W ELLIOTT**
STREET ADDRESS **12 ROSELAWN LANE**
CITY-ST-ZIP **MALVERN PA**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **PD** ☒ Change ☐ Addition
1.2 NAME **WHITE, GEORGE J. JR**
1.3 STREET ADDRESS **3628 MAMARONECK COURT**
1.4 CITY-ST-ZIP **GREEN COVE SPRINGS, FL 32043**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-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, with all other like empowered.

SIGNATURE:

George J. White Jr. **GEORGE J. WHITE JR.**

1/28/99
Date

904-529-1457
Daytime Phone #

CR2E034 (11/98)