				<u> </u>	
FILE	NOW: FILING FEE A	FTER MAY 1 IS \$	225.00		
	ROFIT	> FLORIDA DEPARTME	NT OF STATE		
CORPORATION		Sandra B. Mortham			
\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \		Secretary of S			
7	1996	DIVISION OF CORP	ORATIONS		
DOCUN 1. Corporation		6 (4)			
SEAM	ar marine, inc.				
Principal Place of Business Mailing Address					
% DONNA L. GASECKI % DONNA L. GASECKI					
2285 TANGLEWOOD LANE MERRITT ISLAND FL 32953		2285 TANGLEWOOD LANE			
MERRITIS	ELAND FL 32933	MERRITT ISLAND FL 32953		3. Date Incorporated or Qualified	3a. Date of Last Report
A Drivolnot Dio	no of Diversions	L. D. Malling Addison		02/05/1986 4. FEI Number	07/17/1995
2. Principal Place of Business		2a. Mailing Address		59-2634981	Applied For Not Applicable
	, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State	WWW.TALTIMENEN ATTACKS	City & State		6. Election Campaign Financing	ree Hequireo
23		28		Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	h1 h1	Country	8. This corporation has liability for in Florida Statutes	
24	25 9. Name and Address of Current I	29 30 30 Registered Agent		Florida Statutes Yes  10. Name and Address of New Re	<b>2</b> 45
			81 Name		
	CKI, DONNA L.		82 Street Addr	ess (P.O. Box Number is Not Acceptable	e)
2285 TANGLEWOOD LANE MERRITT ISLAND FL 32953			83		
MENNI	11 IOLANO 1 L 32830				
			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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
1 \	n, and accept the oblightions of, Section			, Vice President	4/29/96
SIGNATURE 1	Signature, typed or printed name of registered agent an		tered Agent signature requirer		DATE DATE
12.	OFFICERS AND I		13. 1. 1 TITLE	ADDITIONS/CHANGES TO OFFICE	CERS AND DIRECTORS IN 12 Change Addition
NAME	GASECKI, STEPHEN J.		1.2 NAME		[] Grange [] Addition
STREET ADDRESS	2285 TANGLEWOOD LANE		1.3 STREET ADDRESS		
CITY-ST-ZIP	MERRITT ISLAND FL		1.4 CITY - ST - ZIP		F7 0
TITLE NAME	GASECKI, DONNA L.		2 1 TITLE 2 2 NAME		Change Addition
STREET ADDRESS	2285 TANGLEWOOD LANE		2.3 STREET ADDRESS		
CITY-ST-ZIP	MERRITT ISLAND FL		2 4 C/TY - ST - ZIP		
TITLE	t Gasecki, Joseph M.		3. 1 TITLE	•	Change Addition
NAME STREET ADORESS	2285 TANGLEWOOD LANE		3 2 NAME 3 3. STREET ADDRESS		
CITY-ST-ZIP	MERRITT ISLAND FL		3.4 C/TY-ST-ZIP		
TITLE	S OAOFOW JOUN I		4 1 TITLE		Change Addition
NAME STREET ADDRESS	Gasecki, John J. 333 Carter Lane		4.2 NAME 4.3 STREET ADDRESS		
CITY-ST-2IP	SOUTHINGTON CT		44 CITY-ST-ZIP		
TITLE			5 1 TITLE	THE PARTY OF THE P	Change Addition
NAME			5 2 NAME		
STREET ADDRESS CITY-ST-ZIP			5 3 STREET ADDRESS 5 4 CHY-ST-ZIP		
TITLE			6 1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

14. To hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 compristic my thin 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 yill of langed, of orran stackment with an address.

SIGNATURE:

Stephen J. Gasecki, President

Objurie Phone 6

6.3 STREET ADDRESS 6.4 City - St - Zip