

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J07136

FILED
Apr 24, 2006
Secretary of State

Entity Name: SEACHASE MANAGEMENT, INC.

Current Principal Place of Business:

17351 FRONT BEACH RD
PANAMA CITY BEACH, FL 32413

New Principal Place of Business:

Current Mailing Address:

17351 FRONT BEACH RD
PANAMA CITY BEACH, FL 32413

New Mailing Address:

FEI Number: 59-2661230

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HANSEN, JOHN E
17351 FRONT BEACH ROAD
PANAMA CITY, FL 32413 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTS () Delete
Name: HANSEN, JOHN E
Address: 17351 FRONT BEACH ROAD
City-St-Zip: PANAMA CITY, FL

Title: D () Delete
Name: HANSEN, JOHN
Address: 17351 FRONT BEACH ROAD
City-St-Zip: PANAMA CITY BEACH, FL

Title: D () Delete
Name: HANSEN, RITA B
Address: 17351 FRONT BEACH ROAD
City-St-Zip: PANAMA CITY, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTS (X) Change () Addition
Name: HANSEN, JOHN E
Address: 17351 FRONT BEACH ROAD
City-St-Zip: PANAMA CITY, FL 32413

Title: D (X) Change () Addition
Name: HANSEN, JOHN
Address: 17351 FRONT BEACH ROAD
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: D (X) Change () Addition
Name: HANSEN, RITA B
Address: 17351 FRONT BEACH ROAD
City-St-Zip: PANAMA CITY, FL 32413

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN E HANSEN

PTSD

04/24/2006

Electronic Signature of Signing Officer or Director

Date