## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 22, 2004 08:00 AM Secretary of State DOCUMENT # J15910 SEASPRAY OCEANFRONT RESORTS, INC. Principal Place of Business Mailing Address % PHILLIP C. BOWSER % PHILLIP C. BOWSER 123 OCEAN AVE. 123 OCEAN AVE. PALM BEACH SHORES, FL 33404 PALM BEACH SHORES, FL 33404 01062004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2694191 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent BOWSER, PHILLIP C. DO NOT WRITE 123 OCEAN AVE. PALM BEACH SHORES, FL 33404 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) DATE U00000125836 04/23/04-80010-005 150.00 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. PST TITLE BOWSER, SHIRLEY NAME STREET ADDRESS 123 OCEAN AVE. CITY-ST-ZIP PALM BEACH SHRS, FL TITLE BOWSER, PHILLIP NAME STREET ADDRESS 123 OCEAN AVE CITY-ST-ZIP PALM BEACH SHRS, FL TITLE NAME STREET ADDRESS DO NOT WRITE CRTY - ST - ZIP IN THIS SPACE STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS

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12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 writere shappears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: \_

CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

BOWSER DIRECTOR