

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 APR 11 PM 3: 25

DOCUMENT # J69697 (7)
1. Corporation Name
SEASCAPE CONSTRUCTION CO. OF OKALOOSA CO., INC.

Principal Place of Business Mailing Address
% JAMES C. PATTERSON **% JAMES C. PATTERSON**
37 PRYOR RD S.E. **37 PRYOR RD S.E.**
FT WALTON BEACH FL 32548 **FT WALTON BEACH FL 32548**

DO NOT WRITE IN THIS SPACE.

3. Date incorporated or Qualified 3a. Date of Last Report
04/27/1987 **05/01/1994**
4. FEI Number Applied For
59-2823071 Not Applicable

2. Principal Place of Business 2a. Mailing Address
21 26
22 27
23 28
24 25 29 30

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 has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
PATTERSON, JAMES C.
37 PRYOR RD
FT WALTON BEACH FL 32548

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
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.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when registering) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PO	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PATTERSON, JAMES C.	1.2 NAME	
STREET ADDRESS	37 PRYOR RD S.E.	1.3 STREET ADDRESS	
CITY - ST - ZIP	FT WALTON BEACH FL 32548	1.4 CITY - ST - ZIP	
TITLE	VO	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PATTERSON, KAREN A	2.2 NAME	
STREET ADDRESS	37 PRYOR RD S.E.	2.3 STREET ADDRESS	
CITY - ST - ZIP	FT WALTON BEACH FL 32548	2.4 CITY - ST - ZIP	
TITLE	SO	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PATTERSON, WILLIAM A	3.2 NAME	
STREET ADDRESS	31 COURT DR.	3.3 STREET ADDRESS	
CITY - ST - ZIP	DESTIN FL 32541	3.4 CITY - ST - ZIP	
TITLE	TD	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PATTERSON, JAMES C III	4.2 NAME	
STREET ADDRESS	37 PRYOR RD. S.E.	4.3 STREET ADDRESS	
CITY - ST - ZIP	FT WALTON BEACH FL 32548	4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(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 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.

SIGNATURE: *Karen A. Patterson* **Karen A. Patterson** **4-5-95** **904/837-6833**
SIGNATURE AND TYPED OR PRINTED NAME OF BRANCH OFFICER OR DIRECTOR Date Telephone Number