

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

**CORPORATION  
ANNUAL REPORT  
1995**



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

**APPROVED  
AND  
FILED**

**95 APR 20 AM 11:50**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

**DOCUMENT # K13746 (8)**

1. Corporation Name  
**SEAG, INC.**

DO NOT WRITE IN THIS SPACE.

Principal Place of Business  
**705 - 27TH AVE. SW  
STE. 5  
VERO BEACH FL 32968  
US**

Mailing Address  
**705 - 27TH AVE. SW  
STE 5  
VERO BEACH FL 32968  
US**

3. Date Incorporated or Qualified  
**02/03/1988**

3a. Date of Last Report  
**04/27/1994**

2. Principal Place of Business  
**21**

2a. Mailing Address  
**26**

4. FEI Number  
**65-0061313**

Applied For  
 Not Applicable

Suite, Apt. #, etc.  
**22**

Suite, Apt. #, etc.  
**27**

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

City & State  
**23**

City & State  
**28**

6. Election Campaign Financing  
Trust Fund Contribution  **\$5.00 May Be Added to Fees**

Zip  
**24**

Country  
**25**

Zip  
**29**

Country  
**30**

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

9. Name and Address of Current Registered Agent  
**WEISSMAN, JOSEPH C.  
705- 27TH AVE., SW  
STE 5  
VERO BEACH FL 32968**

10. Name and Address of New Registered Agent

**B1** Name

**B2** Street Address (P.O. Box Number is Not Acceptable)

**B3**

**B4** City **FL** **B5** 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE **D**

NAME **BENEMANN, JOHN R**

STREET ADDRESS **343 CARAVELLE DR.**

CITY- ST- ZIP **WALNUT CREEK CA**

TITLE **PDT**

NAME **WEISSMAN, JOSEPH C.**

STREET ADDRESS **705 - 27TH AVE., SW, #5**

CITY- ST- ZIP **VERO BEACH FL**

TITLE **D**

NAME **TILLET, DAVID M.**

STREET ADDRESS **1885 - 33RD ST.**

CITY- ST- ZIP **BOULDER CO**

TITLE **D**

NAME **BLUM, AARON B**

STREET ADDRESS **217 DURHAM, CENTURY VILL**

CITY- ST- ZIP **DEERFIELD BEACH FL**

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  Change  Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

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 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 the 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: Joseph C. Weissman, President April 16, 1995 (407) 468-3216

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date (Month/Year)