

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Jul 13 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # L01318 1. Corporation Name THE SEA HEAVEN APARTMENTS, INC.			
Principal Place of Business		Mailing Address	
2935 Lantana Lakes Dr. W. Jacksonville, FL 32246		-same-	
2. Principal Place of Business		2a. Mailing Address	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Zip
24	Country	29	Country
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
Steven R. Scott, Esq. 949 County Road 217 Jacksonville, FL 32234		81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 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: <i>Steven R. Scott, Registered Agent - Secretary</i>		DATE: 7/6/98	
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P/T/D	1.1 TITLE	☐ Change ☐ Addition
NAME	Gloria A. Scott	1.2 NAME	
STREET ADDRESS	2935 Lantana Lakes Dr. W.	1.3 STREET ADDRESS	
CITY- ST- ZIP	Jacksonville, FL 32246	1.4 CITY- ST- ZIP	
TITLE		2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY- ST- ZIP		2.4 CITY- ST- ZIP	
TITLE	S	3.1 TITLE	☐ Change ☐ Addition
NAME	Steven R. Scott, Esq.	3.2 NAME	
STREET ADDRESS	949 CR 217	3.3 STREET ADDRESS	
CITY- ST- ZIP	Jacksonville, FL 32234	3.4 CITY- ST- ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY- ST- ZIP		4.4 CITY- ST- ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY- ST- ZIP		5.4 CITY- ST- ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY- ST- ZIP		6.4 CITY- ST- ZIP	
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i) 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 affidavit filed with an address.			
SIGNATURE: <i>Gloria A. Scott, Pres</i>		DATE: 7/6/98 904-642-9398	

CR2E034 (10/97)