

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 28 PM 2:08

DOCUMENT # M73701 (8)

1. Corporation Name

SEA TOWERS CONSTRUCTION COMPANY, INC.

Principal Place of Business

**1310 GULF BLVD #3A
CLEARWATER FL 34630**

Mailing Address

**1310 GULF BLVD #3A
CLEARWATER FL 34630**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/24/1988

3a. Date of Last Report

03/21/1994

2. Principal Place of Business

21 1560 Gulf Boulevard

Suite, Apt. #, etc.

22

City & State

23 Clearwater, FL

Zip

24 34630

Country

2a. Mailing Address

26 610 Belle Isle Avenue

Suite, Apt. #, etc.

27

City & State

28 Belleair Beach, FL

Zip

29 34634

Country

30

4. FEI Number

59-2904596

Applied For

Not Applicable

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

**KAPLAN, ROBERTA DENNIS
1310 GULF BLVD #3A
CLEARWATER FL 34630**

10. Name and Address of New Registered Agent

81 Name

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

610 Belle Isle Avenue

83

84 City

Belleair Beach

FL

85 Zip Code

34634

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 of registered agent and the corporation)

(Signature of Agent (signature required when reinstating))

(Date)

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

**DVS
KAPLAN, ROBERTA DENNIS
1310 GULF BLVD #3A
SEMINOLE FL**

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

**DPT
COBB, THEODORE
11556 TRADEWINDS BLVD.
LARGO FL**

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

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
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY ST ZIP

**610 Belle Isle Avenue
Belleair Beach, FL 34634**

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY ST ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY ST ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY ST ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY ST ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY ST ZIP

☒ Change ☐ Addition

☐ Change ☐ Addition

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☐ Change ☐ Addition

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 199.07(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 107, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: X

Roberta D. Kaplan, Vice President

3/20/95
X

(813) 595-0361