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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M97773

(9)

SEASNA	AK, INC.									
Principal Plac	ce of Business	Mailing Address	*****************	•••••			,	TOU DIDE DIE	AN BURN BURN	
5186 PANOLA LITHONIA GA		5186 PANOLA MILL DRIVE LITHONIA GA 30038-2351								
					r		3. Date Incorporated or Qualified 09/09/1988	1	e of Last R	eport
2. Principal Place of Business		2a. Mailing Address					4. FEI Number Applied For			
<b>21</b> Suite Apt	# oto	Suite, Apt. #, etc.					59-2929275   Not Applic   \$8.75 Additions			
22		27				5. Certificate of Status Desired			Additional equired	
City & Stal	le	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution  Added to Fees				
Zip Gountry		Zip	Zip Country				8. This corporation has liability for intangible tax under s. 199.032,			
24	25 9. Name and Address of Curren		30]	_			Florida Statutes			
DAV	NKINS, MARK C			31	Name				<b>3</b>	·
	5 EARL CIRCLE WEST		82 Street Addr			ddres	ess (P.O. Box Number is Not Acceptable)			
	KSONVILLE FL 32219				Ollooth		o (1.0. box rumbil is not zoopiao	~,		
			1	83						
			Ī	34	City			FL	<b>85</b> Zip	Code
11 Purcuant	t to the triovisions of Sections 607 0501	2 and 607 1508. Florida Statute	e the ab	200	-named (	orno	ration submits this statement for the pu		changing if	e renisterer
office or agent 1 a	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida Such change was autions of, Section 607.0505; Florida 6	uthorized rida Statu	by tes	the corp	oratio	n's board of directors. I hereby accept	the appo	intment as	registered
SIGNATURE	Say alone, lipped or profit of name of registered ager	nt and tille if applicable (NOTE	. Registered .	Agei	n) signalure r	equired	when reinstating)	DATE		
12.	OFFICERS AND		13.	_		<u> </u>	ADDITIONS/CHANGES TO OFFICE	RS AND	DIRECTOR	RS IN 12
100	PTD	DELETE	1.1 TITL	.E				Ī	Change	Addition
NAME	DAWKINS, MARK C		1.2 NA	Æ						
STREET ADDRESS					ADDRESS		•			
CITY - ST - ZP	LITHONIA GA 30038	DELETE	1.4 CITY	_	T-ZIP		C/8		Change	Addition
THLE		T1 nerese	21 TITL		ا	<b>Y/</b>	S/D		Criarige	Aggiggi
NAME GLOSCA A MODERN		•	2 2 NAN		ADDOCCO	<b>~</b>	WKINS, ERYN J.	Dide		
STREET ADDRESS			2.3 STH		ADDRESS	ンに	THONIA GA 3003	7017C		
011Y - \$1 - 289 101_E		DELETE	31 TITL	_	51-212	<u> 1</u>	HOMA, OF SOCE	Q 3	Change	Addition
NAME		<del></del>	3.2 NAN						_ •	_
STREET ADDRESS			3.3 STR	EET	ADDRESS					
CITY - ST-ZIP			3.4, CIT	Y-S	ST-ZIP					
1011		☐ DELETE	41 TITL	E					Change	Addition
NAME			4 2 NA	ME	İ					
STREET LANDRESS			4.3 STR	EET	ADDRESS					
CITY ST-7VP			4.4 C/T	_	T-ZIP				<del></del>	
TITLE		☐ DELETE	51 TITL		İ			ι	Change	Addition
NAME			5.2 NAN							
STREET ADDRESS					ADDRESS					
CHY-ST ZIP		DELETE	5.4 CiTY 6.1 TiTU		1-20		***************************************		Change	Addition
NAME		hand brinking	62 NAN		1			,		
STREET ADDRESS					ADDRESS					
CITY - ST - ZIP			6.4 CIT							
14 Ldo here	by certify that the information supplied	with this filing does not qualify	v for the e	XAI	motion st	ated i	n Section 119.07(3)(i), Florida Statutes	. I further	certify that	the
l am an c	ion indicated on this annual report or s officer or director of the corporation or In Block 12 or Block 13 if changed, or	the receiver or trustee empower	ered to ex	ec.	irate and ute this re	;nat m ;port r	ny signature shall have the same legal as required by Chapter 607, Florida Sta	епесt as atutes; an	ii made un d that my i	der path; thi name

**FILED** 

Apr 23 1997 8:00am

Secretary of State