## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N08000005238

Title:

Name:

Address:

City-St-Zip:

**PRES** 

PARKER, JEREMY

5709 TALQUIN AVENUE

PENSACOLA, FL 32526

( ) Delete

FILED Apr 15, 2009 Secretary of State

Entity Name: SEASTONE INTERNATIONAL MINISTRIES INC

**Current Principal Place of Business: New Principal Place of Business:** 5709 TALQUIN AVE 3802 PATRICIA DR PENSACOLA, FL 32526 PENSACOLA, FL 32526 **Current Mailing Address: New Mailing Address:** 5709 TALQUIN AVE 3802 PATRICIA DR PENSACOLA, FL 32526 PENSACOLA, FL 32526 FEI Number: 26-2716292 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PARKER, JEREMY C PARKER, JEREMY C 5709 TALQUIN AVE 3802 PATRICIA DR PENSACOLA, FL 32526 US PENSACOLA, FL 32526 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: JEREMY C PARKER 04/15/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition NATALIA, MILANESI Name: Name: 5075 CRESTWOOD ROAD Address: Address: City-St-Zip: PENSACOLA, FL 32503 City-St-Zip: Title: PW ( ) Delete Title: () Change () Addition Name: DANIEL, NOKOVICH Name: Address: 7621 FAITH DR Address: City-St-Zip: PENSACOLA, FL 32534 City-St-Zip: Title: PW () Delete Title: () Change () Addition BRAD, BRANDON Name: Name: Address: 7621 FAITH DR Address: City-St-Zip: PENSACIOLA, FL 32534 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

**PRES** 

PARKER, JEREMY

3802 PATRICA DR

PENSACOLA, FL 32526

(X) Change ( ) Addition

SIGNATURE: JEREMY C PARKER PRES 04/15/2009