FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY -1 PM 1:15

DOCUMENT # **N40367** **(7)**

SEALOFT II OWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
ATTN. LORRI SMITH P. O. BOX 1779 DESTIN FL 32540	ATTN. Dale E. Peterson Realty 321 Highway 98E Destin, FL. 32541
ATTN. LORRI SMITH P. O. BOX 1779 DESTIN FL 32540	SAME

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/12/1990	3a. Date of Last Report: 08/19/1994
4. FEI Number: 59-3042164	Applied For / Not Applicable
5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
6. Elected Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐	$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21 2716 Scenic Highway 98	26 SAME
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: Destin, Fl. 32541	28 City & State
24 Zip: 32541 / 25 Country: OKALOOSA	29 Zip / 30 Country

9. Name and Address of Current Registered Agent

SMITH, LORETTA W
5050 HWY 98 E., STE. 210
DESTIN FL 32541

10. Name and Address of New Registered Agent

81 Name: DALE E. Peterson Realty / Dale E. Peterson
82 Street Address (P.O. Box Number is Not Acceptable): 321 Highway 98 E.
83
84 City: Destin, FL 32541 FL 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: [signature] 4-24-95
(Signature of New Registered Agent, if changed) (Name of New Registered Agent, if changed) (Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS, IN '95	
TITLE	PD	11 TITLE	☐ Change ☐ Addition
NAME	SUKSTORF, STEVEN	12 NAME	
STREET ADDRESS	270 ROSEHILL DR. NO.	13 STREET ADDRESS	
CITY ST ZIP	TALLAHASSEE FL 32312	14 CITY ST ZIP	
TITLE	VPD	21 TITLE	VPD ☒ Change ☐ Addition
NAME	BREITHOUPT, AL	22 NAME	Ms. Penny Aber
STREET ADDRESS	2716 HWY. 98 E #102	23 STREET ADDRESS	2716 Scenic Highway 98
CITY ST ZIP	DESTIN FL 32541	24 CITY ST ZIP	Destin, FL. 32541
TITLE	STD	31 TITLE	☐ Change ☐ Addition
NAME	CUNNINGHAM, MARIAN	32 NAME	
STREET ADDRESS	260 MT. VERNON DR.	33 STREET ADDRESS	
CITY ST ZIP	DECATUR GA 30030	34 CITY ST ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	REMITTED BY MAY 1
CITY ST ZIP		64 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 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 attachment with an address.

SIGNATURE: [signature] Robert Fowner Apr 24, 1995 654-4747
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0071765