

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N40367

FILED
Jan 07, 2003
Secretary of State

Entity Name: SEALOFT II OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

12815 HIGHWAY 98 WEST
SUITE 100
DESTIN, FL 32550 US

New Principal Place of Business:

Current Mailing Address:

12815 HIGHWAY 98 WEST
SUITE 100
DESTIN, FL 32550 US

New Mailing Address:

FEI Number: 59-3042164

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, LORETTA W CAM
12815 HIGHWAY 98 W
SUITE 100
DESTIN, FL 32550 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SMITH, DELPHIA
Address: 1740 COUNTRY RD 39
City-St-Zip: CHELSEA, AL 35043

Title: ST () Delete
Name: TAYLOR, LEX
Address: 937 W MAIN STREET
City-St-Zip: LOUISVILLE, MS 39339

Title: VPD () Delete
Name: KENNEDY, GARY
Address: 6540 BRIDLE WAY DRIVE
City-St-Zip: ARRINGTON, TN 37014

Title: D () Delete
Name: STEPP, LARRY
Address: 1001 OLD TOWNE LANE
City-St-Zip: WOODSTOCK, GA 30189

Title: D () Delete
Name: CASH, PETE
Address: PO BOX 383
City-St-Zip: ELBA, AL 36323

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: DELPHIA SMITH

PD

01/07/2003

Electronic Signature of Signing Officer or Director

Date