

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 13, 2003 8:00 am
Secretary of State

02-13-2003 90252 011 ****61.25

DOCUMENT # N50110

1. Entity Name
SEAWATCH NEIGHBORHOOD ASSOCIATION, INC.



Principal Place of Business

**80 SEAWATCH DR
SEAGROVE BCH FL 32459**

Mailing Address

**80 SEAWATCH DR
SEAGROVE BCH FL 32459**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3131811**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**WRIGHT, WILLIAM E
80 SEA WATCH DR
SEAGROVE BEACH FL 32459**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

William E. Wright **William E. Wright**

JAN. 7, 2003

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **ST** ☐ Delete
NAME **PATERSON, CHARLES B**
STREET ADDRESS **2611 FERNWAY DR**
CITY-ST-ZIP **MONTGOMERY AL 36111**

TITLE **D** ☐ Delete
NAME **COOK, AL**
STREET ADDRESS **9419 DUNLIETH**
CITY-ST-ZIP **MONTGOMERY AL 36117**

TITLE **D** ☐ Delete
NAME **WRIGHT, WILLIAM E.**
STREET ADDRESS **80 SEAWATCH DR**
CITY-ST-ZIP **SEAGROVE BEACH FL 32459**

TITLE **P** ☐ Delete
NAME **CROMMELIN, HARRIETT**
STREET ADDRESS **44 SEAWATCH DRD**
CITY-ST-ZIP **SEAGROVE BEACH FL 32459**

TITLE **V** ☐ Delete
NAME **COOK, DUDLEY**
STREET ADDRESS **9419 DUNLIETH**
CITY-ST-ZIP **MONTGOMERY AL 36117**

TITLE **D** ☐ Delete
NAME **FRAZER, NIM**
STREET ADDRESS **828 THORN PLACE**
CITY-ST-ZIP **MONTGOMERY AL 36106**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Charles B. Paterson **Charles B. Paterson**

2/10/03 (334)269-3143

CR2E037 (10/02)