FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

1998					Secre DIVISION OF	tary of State		ONS	Secretary	of	State
Ę	OCU	MENT In Name		00000	6278 (3	3)					
	SEED	TIME, INC) .								
Pri	incipal Plac	e of Busines	s	Me	ailing Address				- I RODANION DIN TORIN DURAN DURAN DURAN DURAN		
808 TROY BLVD 808 TROY BLVD									3. Date Incorporated or Qualified		
WEST PALM BEACH FL 33409 WEST PALM BEACH FL 33409									12/09/1996		
ļ									4. FEI Number		Applied For
1	2. Principal Place of Business 2a. Mailing Address						-		65-0724326		Not Applicable
21	rmiçipair	ncipal Place of Business 2a. Mailing Addre							5. Certificate of Status Desired		Additional Required
l	Suite, Apt.	#, etc.	Suite, Apt. #, etc.	uite, Apt. #, etc.			8. Election Campaign Financing) May Be		
22	<u> </u>	27							Trust Fund Contribution		to Fees
23	City & State City & State								7. Is this nonprofit corporation a homeowr		ion?
ł	Zip	Country			Zip Country			,	Yes No 8. This corporation owes or has paid the current year intangible		
24	·					30			Personal Property Tax due June 30.	Yes	□ No
		9. Name	and Address of	Current Regist	ered Agent				10. Name and Address of New Registere	d Agent	
							81	Name			
LAWRENCE, JULIUS							82	82 Street Address (P.O. Box Number is Not Acceptable)			
808 TROY BLVD WEST PALM BEACH FL 33409							83				
WEST FALM DEACH PE 33409											
·							84 City FL 85 Zip Code			o Code	
 Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the office or registered agent, or both, in the State of Florida. Such change was authoria agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Si 								-named corp			its registered
	agent. I a	m (am iliar wi	th, and accept th	e obligations of,	ia. Such change was , Section 617.0503, F	autnorize Torida Stat	a by utes	the corporate s.	on's board of directors. I hereby accept the a	ppointment a	as registered
Sic	NATURE .										
12		Signature, typed	or printed name of regis	RS AND DIREC		13.	Age t	nt signature require	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	DRS IN 12
TITL	E	PD			☐ DELETE	1.1 TI	TLE			Change	
NAM	€E		ICE, JULIUS			1.2 N	AME			-	
STR	EET ADDRESS	808 TRO				1.3 \$1	REET	ADDRESS			
	-ST-ZIP		<u>alm beach fl</u>	33409		1.4 CI		T-ZIP			
TITL	_	SD CUC: DC	AAFILANI D		☐ DELETE	2.1 11				☐ Change	Addition
NAA	EET ADORESS		MELVIN B LM BLVD LAKE	e		2.2 N/		ADDRESS			
	'-ST-ZIP		ALM BEACH FL			2.3 S1		1			
TITL		TD	TEM DENOTITE		☐ DELETE	3.1 TI		1) - 2 II	, ,	Change	☐ Addition
NAN	NE	ARMALY	, autara			3.2 N/	ME				
STR	EET ADORESS		STH ST.			3.3 ST	REET	ADDRESS			
	-ST-ZIP	RIVIERA	BEACH FL			3.4. C	TY-S	T-ZIP			
TIM.					DELETE	4.1 T)T				Change	Addition
NAN						4. 2 N					
	et address -st-zip					4.3 ST 4.4 CF		ADDRESS			
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NAN	E					5.2 NA					
STR	EET ADDRESS							ADDRESS			
CITY	-ST-ZIP					5.4 CI	Y-S1	r- ZIP			
TITU					DELETE	6.1 TIT				☐ Change	Addition
NAM	i					6.2 NA		İ			
STR	ET ADDRESS					6.3 ST	RÉET A	ADDRESS			

6.4 CITY-ST-ZIP 14. 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 annual unformation indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the Information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the Information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the Information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the Information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the Information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the Information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the Information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the Information Info

9/26/04 561/00/200

FILED

May 20 1998 8:00am