FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPASTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS FILED Apr 11, 2001 8:00 am Secretary of State 04-11-2001 90135 049 ****61.25

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DOCUMENT # 1. Corporation Name	N97000006665	(O
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SEVEN SEAS DEVELOPMENT CORPORATION 2302 NO. LOWELL LANE

	With training	

	SANTA ANNA, CAL.	92706						
Principal Pla	ace of Business	Mailing Address			{			
	02 NO. LOWELL LAN	- OM	ME		3. Date Incorporated or Qualified 11/24/97			-
. SA	NTA ANNA, CAL. 92	700			4. FEI Number 65-0551097		-	Applied For Not Applicable
21	Place of Business	28. Mailing Address			5. Certificate of Status Desired	0	\$8.7	5 Additional Required
Suite, Ap	t. #, etc.	Suite, Apt. #, etc.			6. Election Campaign Financing) May Be
City & St	ato	City & State			Trust Fund Contribution			i to Fees
23		28			7. Is this nonprofit corporation a h		s associat	tion?
Zip	Country	Zip	Countr	v	8. This corporation owes or has p			(atana'hla
24	25	29	30	•	Personal Property Tax due June		entyeari ZiYes	Intangible No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Ro			
M	ARIE M. MCCLAIN		81	Name				
Į.			82	Stropt A	ddress (P.O. Box Number is Not Acceptate	202		
} , L,	47 8 S.W. 19th AV	L.) Sheet V	bdiess (F.O. box Multiber is 1901 Acceptate	ne)		j
F'	r. Lauderdale, FL	A	83					
33	3312	.'	84	City			85 Zir	Cade
11. Pursuant	to the provisions of Sections 617 0502	and 617 1508. Florida Statute	s the above	e-pamed c	organization submits this statement for the	FL		
office or	registered agent, or both, in the State of	Florida. Such change was a	uthorized by	the corpo	orporation submits this statement for the pration's board of directors. I hereby accept	of the appoint	intment a	s registered
	an tarimar with, and accept the doligate	ons or, section 617.0503, Fig.	rida Statute	S.	·			. }
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE	Registered Ag	ent signature re	outred when reinstaling)	DATE		· }
12.	OFFICERS AND I		13,		ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTO	PRS IN 12
TITLE	PRATT, LAWRENCE	DELETE	4.1 TITLE				☐ Change	☐ Addition
NAME -	2302 NO. LOWELL	LANE	1.2 NAME					į
STREET ADDRESS	SANTA, ANNA, CAI	92706	1,3 STREET	ADDRESS	•			}
CITY-ST-ZIP	ļ	A COLUMN	1.4 CITY - S		·			
TITLE	ANYANE-NTOW, KWI	BENA TOPLETE	Z.1 TITLE	-1		i	☐ Change	☐ Addition
NAME OTDEST ADDRESS	806 JEROME RD.		2 2 NAME	Į.				1
STREET ADDRESS CITY-ST-ZIP	DURHAM, N.C. 277	13	2.3 STREET	ſ				}
TITLE		i.i. □ DELETE	3.1 TITLE		<u> </u>	 -	Change	☐ Addition
NAME	D. JANE PRATT		3.2 NAME	(),			Change	Audition
STREET ADDRESS	1839 WYOMING AVE	N.S.	3.3 STREET	4DD9666	•			- (
CITY-ST-ZIP	WASHINGTON D.C.	20007	3.4, CITY - S					}
TITLE	Warren San	L DELETE	12 MILE				Change	Addition
NAME	544 SO NA	PIVI AVE	4. 2 NAME	\sim $_{\parallel}$	·		•	
STREET ADDRESS			4.3 STREET	ADDRESS }				}
CITY - ST - ZIP	Solana Beach	16,92013	4,4 CITY-ST	1-Z/P			,	ļ*
TITLE		☐ DELETE	5.1 TITLE				Change	Addition
NAME	,	,	5.2 NAME	İ				1
STREET ADDRESS		;	5.3 STREET	address				
CITY-ST-ZIP		·	5 4 CITY - ST	- ZIP			_	}
TITLE		OELETE.	6.1 DILE			. [Change	Addition
NAME	•	•	6.2 NAME					{
STREET ADDRESS			6.3 STREET A					j
CITY-ST-ZIP			6.4 CITY-ST	- ZIP]

I hereby certify that the information supplied with this filling 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 efficer or director of the corporation or the receiver or trustoe empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in

SIGNATURE:

ICER OR DIRECTOR