2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004 8:00 am
Secretary of State
04-30-2004 90265 007 ***158.75

DOCUMENT # P00000112532

1. Entity Name
SEASIDE PRODUCTIONS, INC.

Principal Place of Business	Mailing Address
2607 MALL DR SARASOTA, FL 34231	6625 Superior Ave 2607 MALL DR. SARASOTA, FL 34231 Sarasota FL 34231

02182004 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
6625 Superior Ave. Suite, Apt. #, etc.	6625 Superior AVE. Suite, Apt. #, etc.
City & State: SARASOTA, FL. Zip: 34231 Country: U.S.A.	City & State: SARASOTA, FL. Zip: 34231 Country: U.S.A.

4. FEI Number: 65-1079405 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ROBINSON, ANGIE 2607 MALL DR 6625 Superior Ave. SARASOTA, FL 34231	Name: Angie Robinson Street Address (P.O. Box Number is Not Acceptable): 6625 Superior AVE. City: SARASOTA, FL Zip Code: 34231

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 _____
Signature of new or successor registered agent (if applicable) Date Registered agent signature required (if changing)

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	D DUCHANO, ROBERT 2607 MALL DR. SARASOTA, FL 34231	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	P/D Robert Duchano 2948 Clark Rd. # 121 SARASOTA, FL, 34231	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	V/D Thomas Wotton 7157 Bay St. SARASOTA, FL 34239	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	T/D David Antunes 2110 Ben Franklin Dr. 108 S SARASOTA, FL 34236	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP		☐ Change ☐ Addition

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 607, 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: Thomas Wotton Thomas Wotton
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date