

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # P93000069688

1. Entity Name

SEELEY AND RYE TROPIC TOWING, INC.



Principal Place of Business

626 THIRD PLACE
VERO BEACH, FL 32962-3637 US

Mailing Address

226 31 AVE SW
VERO BEACH, FL 32968-3211 US



02092006

No Chg-P

CR2E034 (11/05)

4. FEI Number

65-0453831

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

SEELEY, DEBORAH Z
226 31ST AVENUE SW
VERO BEACH, FL 32968-3211

**DO NOT WRITE
IN THIS SPACE**

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PDT
SEELEY, JOHN P SR
226 31 ST AVENUE SW
VERO BEACH, FL 329683211

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPDT
SEELEY, DEBORAH Z VPDT
226 31ST AVE SW
VERO BEACH, FL 329683211

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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05/15/06-80054-021 158.75

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

Deborah Z Seeley

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4. 24.06 772.503.3080

Date

Daytime Phone #

Deborah Z Seeley