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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000026158 (3)

1. Corporation Name
EDWARD W. SEESE ENTERPRISES, INC.

Principal Place of Business Mailing Address

5570 NE 31ST AVE. 5570 NE 31ST AVE.
FT. LAUDERDALE FL 33308 FT. LAUDERDALE FL 33308

2. Principal Place of Business 2a. Mailing Address

21 26 **P. O. Box 11025**

22 Suite, Apt. #, etc. 27 Suite, Apt. #, etc.

23 City & State 28 **Ft. Lauderdale, FL**

24 Zip 25 Country 29 **33339** 30 Country

3. Date Incorporated or Qualified 3a. Date of Last Report

04/06/1994

4. FEI Number Applied For

65-0487542 Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

8. This Corporation has liability for intangible tax under S. 194.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

**LEONARD, WILLIAM F
4875 N. FEDERAL HWY, 10TH FLOOR
FT. LAUDERDALE FL 33308**

10. Name and Address of New Registered Agent

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City B5 Zip Code

FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
Signature: Lastname (print name of registered agent and the 9 applicable) NOTE: Registered Agent signature required when registering.

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	P, D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SEESE, EDWARD W	1.2 NAME	Thornton, Emma
STREET ADDRESS	5570 NE 31ST AVE.	1.3 STREET ADDRESS	P. O. Box 11025 n/a
CITY, ST, ZIP	FT. LAUDERDALE FL 33308	1.4 CITY, ST, ZIP	Ft. Lauderdale, FL, 33339
TITLE		2.1 TITLE	VP, D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME	LaBate, James
STREET ADDRESS		2.3 STREET ADDRESS	P. O. Box 11025 n/a
CITY, ST, ZIP		2.4 CITY, ST, ZIP	Ft. Lauderdale, FL, 33339
TITLE		3.1 TITLE	ST, D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME	Leonard, William F
STREET ADDRESS		3.3 STREET ADDRESS	P. O. Box 11025 n/a
CITY, ST, ZIP		3.4 CITY, ST, ZIP	Ft. Lauderdale, FL, 33339
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY, ST, ZIP		4.4 CITY, ST, ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY, ST, ZIP		5.4 CITY, ST, ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY, ST, ZIP		6.4 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 officer or director of this corporation or its receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13, indicated, or on an addition, but with an addition.

SIGNATURE:  305-776-3600 4/24/95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Filed

William F. Leonard