

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000036385

1. Entity Name

THE SEAGRAPE COMPANY

FILED
Apr 04, 2000 8:00 am
Secretary of State

04-04-2000 90106 022 ***150.00

Principal Place of Business

~~4252 RAPALLO RD.~~
JACKSONVILLE FL 32244

Mailing Address

~~4252 RAPALLO RD.~~
JACKSONVILLE FL 32244-2360

2. Principal Place of Business

4241 Salerno Rd South

3. Mailing Address

4241 Salerno Rd South

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Jacksonville, Florida

City & State

Jacksonville, Florida

Zip

32244

Country

USA

Zip

32244

Country

USA

4. FEI Number

59-3306492

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

Name

HASTINGS, KEVIN H

~~4252 RAPALLO ROAD~~
JACKSONVILLE FL 32244

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

4241 Salerno Road South

City

Jacksonville

FL

Zip Code

32244

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME HASTINGS, SUSAN L
STREET ADDRESS ~~4252 RAPALLO RD.~~
CITY-ST-ZIP JACKSONVILLE FL 32244

TITLE ☐ Change ☐ Addition
NAME 4241 Salerno Road South
STREET ADDRESS Jacksonville, Fla 32244
CITY-ST-ZIP

TITLE D ☐ Delete
NAME HASTINGS, KEVIN H
STREET ADDRESS ~~4252 RAPALLO RD.~~
CITY-ST-ZIP JACKSONVILLE FL 32244

TITLE ☐ Change ☐ Addition
NAME 4241 Salerno Road South
STREET ADDRESS Jacksonville, Fla 32244
CITY-ST-ZIP

TITLE D ☐ Delete
NAME HENRY, VICTORIA M
STREET ADDRESS 12861 CURT DR.
CITY-ST-ZIP JACKSONVILLE FL 32228

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME HENRY, FRED R
STREET ADDRESS 12861 CURT DR.
CITY-ST-ZIP JACKSONVILLE FL 32223

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Kevin H. Hastings

Date

3/31/2000 (904) 390-7114

Daytime Phone #

CR2E034 (9/99)