FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P94000037005 (3)**

1. Corporation Name

SEAGATE HOME REALTY, INC.

Principal Place of Business

3 COLE PLACE
PALM COAST FL 32137

Mailing Address

3 COLE PLACE
PALM COAST FL 32137

3. Date Incorporated or Qualified: 05/17/1994

3a. Date of Last Report: 05/30/1995

4. FEI Number: 59-3243598 — Applied For / 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. 199.032, Florida Statutes ☐ Yes ☑ No

2. Principal Place of Business

21 25 Old Kings Rd. North
22 Suite, Apt. #, etc.: Suite 4B
23 City & State: Palm Coast, Fl.
24 Zip: 32137
25 Country: USA

2a. Mailing Address

26 25 Old Kings Rd. North
27 Suite, Apt. #, etc.: Suite 4B
28 City & State: Palm Coast, Fl.
29 Zip: 32137
30 Country: USA

9. Name and Address of Current Registered Agent

GUNTHARP, PAUL M JR.
4 OLD KINGS RD. NORTH
SUITE B
PALM COAST FL 32137

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City: FL
85 Zip Code

11. Pursuant to the provisions of Sections 607.0505 and 607.1506, 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

12. OFFICERS AND DIRECTORS

TITLE	DPST	☐ DELETE
NAME	GAZZOLI, ROBERT J	
STREET ADDRESS	57 EAGLE HARBOUR TRAIL	
CITY-ST-ZIP	PALM COAST FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	ST	☑ Change ☐ Addition
1.2 NAME	Gazzoli, Robert J	
1.3 STREET ADDRESS	57 Eagle Harbor Trail	
1.4 CITY-ST-ZIP		
2.1 TITLE	P	☐ Change ☑ Addition
2.2 NAME	George G. Souris	
2.3 STREET ADDRESS	12 Village Circle	
2.4 CITY-ST-ZIP	Palm Coast, Fl. 32164	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
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 119.07(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 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 12 or Block 13 above, or on an attachment with an address.

SIGNATURE: [signature] — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/96 — Date

(904) 445-9009 — Daytime Phone #

CR2E034 (12/95)