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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

P95000052208 (2) **DOCUMENT #** Corporation Name

SEBASTIAN REAL PROPERTIES, INC.

Mailing Address Principal Place of Business 631 U.S. HIGHWAY ONE 831 U.S. HIGHWAY ONE SUITE 303 SUITE 303 N. PALM BEACH FL 33408 3a. Date of Last Report 3. Date incorporated or Qualified N. PALM BEACH FL 33408 06/30/1995 Applied For 4. FEI Number 2a. Mailing Address 2. Principal Place of Business Not Applicable 65-060466 26 21 \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Suite, Apt. #, etc Fee Required 27 22 \$5.00 May Be 6. Election Campaign Financing City & State City & State Added to Fees Trust Fund Contribution 28 8. This corporation has liability for intangible tax under s 199.032, 23 Country Zici Country Yes No Zio Florida Statutes 30 29 24 10. Name and Address of New Registered Agent 25 9. Name and Address of Current Registered Agent 81 Name Street Address (P.O. Box Number is Not Acceptable) NORRIS, DAVID B 712 U.S. HIGHWAY ONE 83 N. PALM BEACH FL 33408 Zip Code City 84 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. TRO'E Progologed Agent Signature required when ministary g SIGNATURE Signature, typed or printed has elof rejudental eye it and the integral rather ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. OFFICERS AND DIRECTORS ☐ Change · 12. 1 1 TOLE TITLE President 1.2 NAME Sebastian Smallegange 1.3 STREET ADDRESS STREET ADDRESS 12214 Seaward Dr West 1.4 CETY - ST - ZIP Add-tion CITY - ST - ZIP Change | N Palm Beach, Fl 33408 SLETE 2 1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2 4 CITY - ST - ZIF Addition ☐ Change CITY-ST-ZIP DELETE 3 1 TifLE TITLE 3.2 NAMÉ NAME 3.3 STREET ADDRESS STREET ADDRESS 34 CITY - ST - ZIP [] Change ☐ Addition CITY - ST - ZIP DELETE 4 1 TITLE TITLE 4.2 NAME 4.3 STREET ADDRESS 300001826803 STREET ADDRESS 4.4 CITY - \$1 - 20F -05/20/96--01004--0itOchange Addition CITY - ST - ZIP ☐ DELETE 5 1 TallE ***200.00 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY · ST · ZIP Addition CITY-ST-ZIP 6 1 10 LE DELETE TITLE 6.2 NAME NAME

6.3 STREET ADDRESS

6.4 C(TY - ST - Z(P)

SIGNATURE: _

14. I do hereby certify that the information supplied with this filing is certify that the information indicated on this armost report or support that I am an officer or director of the corporation of the recappears in Block 12 or Block 13 if changed or on an attachment.

STREET ADDRESS

CITY-S1-ZIP

SIGNATURE AND TYPED OR PRINTED

All, itarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further operental annual report is true and accurate and that my signature shall have the same legal effect as if made under every crustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

CR2E034 (12/95)