

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 06, 2007 08:00 A
Secretary of State

DOCUMENT # P96000058469

1. Entity Name
SAN SEBASTIAN MARINE, INC.



Principal Place of Business
**65 LEWIS BOULEVARD
ST. AUGUSTINE, FL 32084**

Mailing Address
**65 LEWIS BOULEVARD
ST. AUGUSTINE, FL 32084 US**



04042007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3391314	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**DOUGLAS, DONALD C.
5307 RIVERVIEW DRIVE
ST. AUGUSTINE, FL 32084**

**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, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	DOUGLAS, DONALD C
STREET ADDRESS	3333 MICKLER ROAD
CITY-ST-ZIP	ST. AUGUSTINE, FL 32084
TITLE	V
NAME	MARTIN, EDWIN K
STREET ADDRESS	7635 A1A SOUTH
CITY-ST-ZIP	ST AUGUSTINE, FL 32080
TITLE	S
NAME	CAMPBELL, ROY E JR
STREET ADDRESS	9191 JEAN JOHNSON ROAD
CITY-ST-ZIP	ST. AUGUSTINE, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/16/07-80034-021 150.00

**DO NOT WRITE
IN THIS SPACE**

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:

Donald C Douglas

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-4-07 Roy 829-9224

Date

Daytime Phone #