

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000060906

1. Entity Name

SEASIDE AT LONGBEACH, INC.

FILED
May 16, 2001 8:00 am
Secretary of State

05-16-2001 90031 041 ***150.00

Principal Place of Business

227 HARRISON AVE
PANAMA CITY FL 32401

Mailing Address

227 HARRISON AVE
PANAMA CITY FL 32401

2. Principal Place of Business

90 Hilltop Drive

3. Mailing Address

90 Hilltop Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Bayfield CO

City & State

Bayfield CO

Zip

81122

Country

USA

Zip

81122

Country

USA

4. FEI Number

59-3398057

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

INGLIS, JOHN S
101 E KENNEDY BLVD STE 2800
TAMPA FL 33602

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/28/01

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, 2001 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

TITLE D
NAME DARRAH, JOHN W
STREET ADDRESS 227 HARRISON AVE
CITY-ST-ZIP PANAMA CITY FL 32401 ☒ Delete

TITLE D
NAME MCNEESE, S D
STREET ADDRESS 227 HARRISON AVE
CITY-ST-ZIP PANAMA CITY FL 32401 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE D
NAME MCNEESE, S D
STREET ADDRESS 90 Hilltop Drive
CITY-ST-ZIP Bayfield, CO 81122 ☒ Change ☐ Addition

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

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

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

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

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

S. Dale McNEESE

4/28/01

Date

970-884-1780

Daytime Phone #

CR2E034 (10/00)