2001 UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # P970000 May 07, 2001 8:00 am **Secretary of State** SEA HAVEN INC. 05-07-2001 90051 020 ***150.00 PANAMA City BEACH FI PANAMA City, 32407 EI 2011 F1 32406 00046229 Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3008058 City & State City & State Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name WARD, MURRAY R. 7021 STARFISK Court Street Address (P.O. Box Number is Not Acceptable) PANAMA City BEACH Fl 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. PLESIDENT

OTE: Registered Agent signature required when rein l and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. (See criteria on back) --Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS PRESIDENT Delete
MURRAY R. WARD
1021 SHARFISH COURT
PANAMA CITY BEACK F/ 32467 ☐ Change ■ Addition TIT! F NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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 his 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. 04/02/01 850-236 8833
Davine Phone # SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Please make corrections: Sea Haven Inc.

Principal place of business.

7021 Starfish Court Panama City Beach, FI 32407

Address of officers and directors:

Ward, Murray R. 7021 Starfish Court Panama City Beach, FI 32407

Mailing Address:

P.O. Box 15925 Panama City, FI 32406

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P.O. Box 15925 Panama City, FI 32406

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