

ANNUAL REPORT

DOCUMENT # P97000017056 .

1. Entity Name
SEA HAVEN, INC.Principal Place of Business
1014 WEST 10TH ST.
PANAMA CITY, FL 32401Mailing Address
P.O. BOX 15925
PANAMA CITY, FL 32406

01042005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE4. FEI Number
76-0703571Applied For
Not Applicable5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WARD, MURRAY R
1014 WEST 10TH ST.
PANAMA CITY, FL 32401**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: *MURRAY R. WARD*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

01/04/05

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**9. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PVD
WARD, MURRAY R
1014 WEST 10TH ST.
PANAMA CITY, FL 32401TITLE
NAME
STREET ADDRESS
CITY - ST - ZIPTITLE
NAME
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CITY - ST - ZIPTITLE
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CITY - ST - ZIPTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP100000174428
01/10/05-80011-002 150.00**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or Block 11 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

01/04/05

Date

850-785-6925

Daytime Phone #

Jan 10,
Seci