## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Apr 28, 2004 8:00 am Secretary of State **DOCUMENT # P97000042807** 04-28-2004 90217 040 \*\*\*150.00 SEA BREEZE HOMES & CONSTRUCTION OF MANATEE CO., INC. Principal Place of Business Mailing Address 3722 45TH ST E 3722 45TH ST E BRADENTON, FL 34208 BRADENTON, FL 34208 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02262004 CR2E034 (10/03) 4. FEI Number Applied For City & State City & State 65-0766147 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CORIGLIANO, KENNETH D Street Address (P.O. Box Number is Not Acceptable) 3722 45TH ST E BRADENTON, FL 34208 굨 City Zip Code 5. 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 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Addition TITLE ☐ Delete TTLE Change NAME -CORIGLIANO KENNETH D NAME STREET ADDRESS 5005-26TH AVE. WEST STREET ADDRESS CITY-ST-ZIP BRADENTON, FL 34209 CITY-ST-ZIP Addition ☐ Delete TITLE ☐ Change TITLE NAME CORIGLIANO, AMIEE NAME 5005 26TH AVENUE WEST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BRADENTON, FL 34209 CITY-ST-ZIP Addition Delete ☐ Change TITLE TITLE NAME MILKS, BENJAMIN NAME STREET ADDRESS 5005 216TH AVENUE WEST STREET ADDRESS CITY-ST-ZIP BRADENTON, FL 34209 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition CORIGIANO, KENNETH K NAME NAME 5105 26TH AVE W STREET ADDRESS STREET ADDRESS CITY-ST-7IP BRADENTON, FL 34209 CITY-ST-7IP TITLE Defete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF TITLE □ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-2/P 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 attachm Perigliano Pra 4-22-04 SIGNATURE: MINUTES

**FILED**