## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # P97000093953 (2)

SEABOARD AVENUE DEVELOPMENT, INC.

Principal Place of Business

Mailing Address

## **FILED** May 14 1998 8:00am Secretary of State



JACKSONVILLE FL 32216		JACKSONVILLE FL 32216				
NACKBONVILLE PL 32210		SYCHOCHAITTE I E 355	10	DO NOT WRITE IN TH	DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified		
				10/27/1997		
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For	
21 9551 BAYMEADOWS ROAD		26 9551 BAYMEADOWS ROAD		59-3486251	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22 SUITE 4		27 SUITE 4		5. Certificate of dialog Desired	Fee Required	
City & State		City & State		Election Campaign Financing	\$5.00 May Be	
23 JACKSONVILLE FL		28 JACKSONVILI		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip				
24 32256	25	29 32256	30	Personal Property Tax due June 30.	L <b>X</b> Yes ☐ No	
g Name and Address of Current Registered Agent			041 14	10. Name and Address of New Register	ed Agent	
HURST, CHRISTOPHER J  4540 SOUTHSIDE BLVD STE 202						
	O <b>So</b> uthside BLVD, Ste 302		82 Street	Address (P.O. Box Number is Not Acceptable)		
JAC	KSONVILLE FL 32216		95	51 BAYMEADOWS ROAD, SUITE 4		
			83			
	4		84 City		85 Zip Code.	
				CKSONVILLE F	L   32256	
11. Pursuant to the provisions of Sectoris 7070502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered about or hour manufactor of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the diligiators of, Section 607.0505, Florida Statutes.						
agent, I am lamiliar with and accept by dbligations of, Section 607.0505, Florida Statutes.						
SIGNATURE .		<i>f</i> 2	E. CHESTER	STOKES, JR. 4/15		
3,0,10,10	Signature, typed or printed name of requirered as		)   Registered Agent signature	e required when re-installing) DAT		
12.		NO DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A		
TITLE	D CHRISTONIES I	<b>XX</b> DELETE	1.1 TITLE	DP	☐ Change 【 Addition	
NAME	HURST, CHRISTOPHER J	F 000	1.2 NAME	STOKES, E CHESTER JR		
STREET ADDRESS	4540 SOUTHSIDE BLVD, ST	E 302	1.3 STREET ADDRESS	9551 BAYMEADOWS ROAD SUITE	i 4	
CITY-ST-ZIP	JACKSONVILLE FL 32216		1.4 CITY - ST - ZIP	JACKSONVILLE FL 32256		
TITLE		☐ DELETE	2.1 TOLE	DV	Change Addition	
NAME			2.2 NAME	PUTNAL, JAMES E		
STREET ADDRESS			2.3 STREET ADDRESS	9551 BAYMEADOWS ROAD SUITE	4	
CITY-ST-ZIP			2. 4 CITY-ST-ZIP	JACKSONVILLE FL 32256		
TITLE		DELETE	3.1 TITLE	V	Change K Addition	
NAME			3.2 NAME	BRAREN, MICHAEL E		
STREET ADDRESS			3.3 STREET ADDRESS	9551 BAYMEADOWS ROAD SUITE	. 4	
CITY-ST-ZIP			3.4. CITY - ST - ZIP	JACKSONVILLE FL 32256		
TITLE		☐ DELETE	4.1 TITLE	V	Change X Addition	
NAME			4. 2 NAME	WALLACE, L DENISE		
STREET ADDRESS			4.3 STREET ADDRESS	9551 BAYMEADOWS ROAD, SUIT	E 4	
CITY-ST-ZIP			4.4 CITY - ST - ZIP	JACKSONVILLE FL 32256		
TITLE		DELETE	5.1 TITLE	VT	Change Addition	
NAME			5.2 NAME	FREDENHAGEN, SHARON W		
STREET ADDRESS			5.3 STREET ADDRESS	9551 BAYMEADOWS ROAD, SUIT	E 4	
CITY-ST-ZIP			5.4 CITY - ST - ZIP	JACKSONVILLE FL 32256	- '	
TITLE		DELETE	6.1 TITLE	S	Change 💽 Addition	
NAME			6.2 NAME	HICE, SHERRY	}	
STREET ADDRESS			6.3 STREET ADDRESS	9551 BAYMEADOWS ROAD, SUIT	E 4	
CITY-ST-ZIP			6.4 CITY - S1 - ZIP	JACKSONVILLE FL 32256	- '	
			VI FII	<u> </u>		

14. 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 annual report or suppliemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

Sherry Hice 4/15/98 904/739-2249