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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 1. Corporation Name P97000103997 (7)

SEALCOAT ENTERPRISES, INC.

Principal Place of Business

Mailing Address

FILED Apr 15 1998 8:00am Secretary of State



1422 PARK BEACH CIRCLE 1422 PARK BEACH CIRCLE **PUNTA GORDA FL 33950 PUNTA GORDA FL 33950** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/10/1997 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 25 29 30 Personal Property Tax due June 30. Yes 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 GREENE, DAWN CERBONE 1422 PARK BEACH CIRCLE B2 Street Address (P.O. Box Number is Not Acceptable) **PUNTA GORDA FL 33950** 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State 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 obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable DATE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE □ DELETE 1.1 TITLE ☐ Change Addition **GREENE, DAWN CERBONE** NAME 1.2 NAME 1422 PARK BEACH CIRCLE STREET ADDRESS 1.3 STREET ADORESS PUNTA GORDA FL 33950 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE GREENE, ROSWELL JR NAME 2.2 NAME STREET ADDRESS 1422 PARK BEACH CIRCLE 2.3 STREET ADDRESS **PUNTA GORDA FL 33950** CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE TITLE Change ☐ Addition 31 TITLE **VOLLMER, CHRISTINE** NAME 3.2 NAME 1422 PARK BEACH CIRCLE STREET ADDRESS 3.3 STREET ADDRESS **PUNTA GORDA FL 33950** CITY-ST-ZIP 34. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change TITLE 6.1 TITLE Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. Thereby 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 supplemental 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 opporation 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 changes of order in a statement with an address.