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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## FILED Mar 31, 1999 8:00 am Secretary of State

03-31-1999 90035 025 \*\*\*150.00

1. Corporation Name SEALCOAT ENTERPRISES, INC.  Principal Place of Business 1422 PARK BEACH CIRCLE PUNTA GORDA FL 33950  2. Principal Place of Business 21	Mailing Address 1422 PARK BEACH CIRCLE PUNTA GORDA FL 33950  2a. Mailing Address 26		DO NOT WRITE IN THIS  3. Date Incorporated or Qualifed  12/10/1997  4. FEI Number  65-0799993	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
23 Zip Country	Zip	Country	Election Campaign Financing     Trust Fund Contribution     This corporation owes the current year in	\$5.00 May Be Added to Fees
9. Name and Address of Curren	29     30   t Registered Agent	81 Name	Personal Property Tax.  10. Name and Address of New Registered	Yes Agent
Greene, Dawn Cerbone 1422 Park Beach Circle Punta Gorda FL 33950		83 84 City	ess (P.O. Box Number is Not Acceptable)	
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 poth, 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  SIGNATURE  SIGNATURE  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE DST  NAME GREENE, DAWN CERBONE  STREET ADDRESS CITY-ST-ZIP PUNTA GORDA FL 33950	VIUL PRESIDENT)	1.2 NAME GIPA 1.3 STREET ADDRESS 142	CE PILESIJEM LENE IDAWN CEPBONE 12 PAPK BEACH CINCIC 1914 (1410A A 33950	<b>☆</b> Change
TITLE P NAME GREENE, ROSWELL JR STREET ADDRESS CITY-ST-ZIP PUNTA GORDA FL 33950	☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		☐ Change ☐ Addition .
NAME  STREET ADDRESS  CITY-ST-ZIP  VOLLMER, CHRISTINE  1422 PARK BEACH CIRCLE  PUNTA GORDA FL 33950		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. C/TY-ST-ZIP		Change Addition
TITLE NAME STREET ADDRESS	☐ DELETÉ	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	-	☐ Change ☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	□ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

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 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 composition 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 phanged or on an attagramment with an address, with all other like empowered.