

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S19638

1. Entity Name

SEA VILLAS DEVELOPMENT CORPORATION

FILED
May 02, 2000 8:00 am
Secretary of State

05-02-2000 90027 038 ***150.00

Principal Place of Business

Mailing Address

751 THIRD AVE.
 NEW SMYRNA BEACH FL 32169

751 THIRD AVE.
 NEW SMYRNA BEACH FL 32169-3101

2. Principal Place of Business

920 Third Ave.

3. Mailing Address

920 Third Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

New Smyrna Beach, FL

City & State

New Smyrna Beach, FL

4. FEI Number

59-3042721

Applied For

Not Applicable

Zip

32169

Country

US

Zip

32169

Country

US

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KOSMAS, JAMES M.

~~751 THIRD AVENUE~~ 111 Live Oak St.
 NEW SMYRNA BEACH FL 32169

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP ☐ Delete
 NAME KOSMAS, STEVEN P
 STREET ADDRESS ~~751 THIRD AVE~~
 CITY-ST-ZIP NEW SMYRNA BEACH FL

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS 920 Third Ave.
 CITY-ST-ZIP

TITLE STV ☐ Delete
 NAME KOSMAS, PAUL
 STREET ADDRESS ~~751 THIRD AVE~~
 CITY-ST-ZIP NEW SMYRNA BEACH FL

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS 920 Third Ave.
 CITY-ST-ZIP

TITLE VP ☐ Delete
 NAME DUFFY, TRUDY
 STREET ADDRESS ~~751 THIRD AVE~~
 CITY-ST-ZIP NEW SMYRNA BEACH FL

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS 920 Third Ave.
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Steven P. Kosmas
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/13/00

Date

Daytime Phone #

CR2E034 (9/99)