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FILED
Mar 25 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **V42653** (8)

1. Corporation Name
SEASIDE DEVELOPMENT CORP.

Principal Place of Business
1212 SO. MYRTLE AVENUE
CLEARWATER FL 34616

Mailing Address
1212 SO. MYRTLE AVENUE
CLEARWATER FL 34616-3425

3. Date Incorporated or Qualified: 06/08/1992
3a. Date of Last Report: 04/23/1996
4. FEI Number: 59-3129329 — Applied For / Not Applicable

2. Principal Place of Business
21
22 Suite, Apt #, etc.: 1208 SO. MYRTLE AVE.
23 City & State: CLEARWATER FL
24 Zip: 34616
25 Country: USA

2a. Mailing Address
26
27 Suite, Apt #, etc.: 1208 SO MYRTLE AVE.
28 City & State: CLEARWATER FL
29 Zip: 34616
30 Country: USA

5. Certificate of Status Desired ☐ — **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☑ Yes ☐ No

9. **Name and Address of Current Registered Agent**
JUENGLING, CHARLES E.
1212 SO. MYRTLE AVENUE
CLEARWATER FL 34616

10. **Name and Address of New Registered Agent**
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 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) DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	JUENGLING, CHARLES E.	
STREET ADDRESS	1212 SO. MYRTLE AVE.	
CITY-ST-ZIP	CLEARWATER FL 34616	
TITLE	VSTD	☐ DELETE
NAME	BYRD, ROBERT W.	
STREET ADDRESS	1208 SO. MYRTLE AVE.	
CITY-ST-ZIP	CLEARWATER FL 34616	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	☐ Change ☐ Addition
1.2 NAME	JUENGLING, CHARLES E.	
1.3 STREET ADDRESS	1208 SO. MYRTLE AVE.	
1.4 CITY-ST-ZIP	CLEARWATER FL 34616	
2.1 TITLE	~~VSTD~~	☐ Change ☐ Addition
2.2 NAME	~~BYRD, ROBERT~~	
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

CR2E034 (9/96)

14. I do 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 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.

SIGNATURE: [signature] SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 3/20/97 Daytime Phone #: (813) 461-6149

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