2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 18, 2000 8:00 am
Secretary of State
01-18-2000 90090 039 ***150.00

DOCUMENT # L02423

1. Entity Name

MARINA HOMES AT SEAWATCH, INC.

Principal Place of Business	Mailing Address
8402 GULF OF MEXICO BLVD. MARATHON FL 33050	8402 GULF OF MEXICO BLVD. MARATHON FL 33050-3033

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0141717 — Applied For / Not Applicable

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
REHBOCK, ROBERT M. 8402 GULF OF MEXICO BLVD. MARATHON FL 33050	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	DST ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	REHBOCK, ROBERT M.	NAME	
STREET ADDRESS	11840 OVERSEAS HWY	STREET ADDRESS	
CITY-ST-ZIP	MARATHON FL	CITY-ST-ZIP	
TITLE	DP ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	HOTZ, JACK	NAME	
STREET ADDRESS	11840 OVERSEAS HWY	STREET ADDRESS	
CITY-ST-ZIP	MARATHON FL	CITY-ST-ZIP	
TITLE	DVP ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	DUTSON, DONALD	NAME	
STREET ADDRESS	11840 OVERSEAS HWY	STREET ADDRESS	
CITY-ST-ZIP	MARATHON FL	CITY-ST-ZIP	
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	SCHIPANI, LOUIS	NAME	
STREET ADDRESS	11840 OVERSEAS HWY	STREET ADDRESS	
CITY-ST-ZIP	MARATHON FL	CITY-ST-ZIP	
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	IULO, KENNETH	NAME	
STREET ADDRESS	11840 OVERSEAS HWY	STREET ADDRESS	
CITY-ST-ZIP	MARATHON FL	CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		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: _____ 1/10/00 (305) 743 2806
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (9/99)