

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)


FILED
Mar 17, 2003 8:00 am
Secretary of State

03-17-2003 90079 044 ***150.00

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DOCUMENT # L02423

1. Entity Name
MARINA HOMES AT SEAWATCH, INC.



Principal Place of Business
**8402 GULF OF MEXICO BLVD.
MARATHON FL 33050**

Mailing Address
**8402 GULF OF MEXICO BLVD.
MARATHON FL 33050**

2. Principal Place of Business
626 Gravelly Hollow Rd

3. Mailing Address
PO Box 459

Suite, Apt. #, etc.

City & State
Medford

City & State
Medford

Zip
33051

Country
USA

Zip
08055

Country
USA

CHECK HERE IF MAKING CHANGES

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

**REHBOCK, ROBERT M.
8402 GULF OF MEXICO BLVD.
MARATHON FL 33050**

7. Name and Address of New Registered Agent

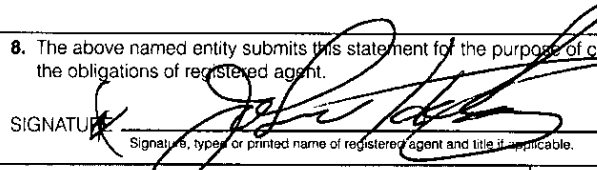
Name **John C. Hotz**

Street Address (P.O. Box Number, is Not Acceptable)
626 Gravelly Hollow Rd (P.O. Box 459)

City **Medford** (Mailing Address)

City **New Jersey** FL Zip Code **33051**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE 

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

| | | |
|------------------------------------------------|--------------------------------------------------------------------------|--------------------------------------------|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DST REHBOCK, ROBERT M. 11840 OVERSEAS HWY MARATHON FL | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DP HOTZ, JACK 11840 OVERSEAS HWY MARATHON FL | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DVP DUTSON, DONALD 11840 OVERSEAS HWY MARATHON FL | <input checked="" type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D SCHIPANI, LOUIS 11840 OVERSEAS HWY MARATHON FL | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D IULO, KENNETH 11840 OVERSEAS HWY MARATHON FL | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|------------------------------------------------|--|-------------------------------------------------------------------|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____ Daytime Phone # _____

CR2E034 (10/02)