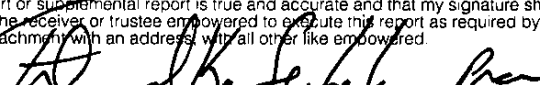


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 22, 2007 08:00 AM
Secretary of State

DOCUMENT # 367019 1. Entity Name SEIBELS ENTERPRISES, INC.			
Principal Place of Business 75 FAIRWAY DR. BIRMINGHAM, AL 35213		Mailing Address 75 FAIRWAY DR. BIRMINGHAM, AL 35213	
DO NOT WRITE IN THIS SPACE			
		01112007 No Chg-P CR2E034 (11/05)	
		4. FEI Number 63-0587975	Applied For Not Applicable
		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			
ESTES, CODY 3705 20TH ST VERO BEACH, FL 32960		DO NOT WRITE IN THIS SPACE	
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, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	U000000594253 01/22/07-80061-025 150.00
10. OFFICERS AND DIRECTORS			
TITLE	CD	DO NOT WRITE IN THIS SPACE	
NAME	SEIBELS, H.G. JR		
STREET ADDRESS	75 FAIRWAY DRIVE		
CITY-ST-ZIP	BIRMINGHAM, AL 35213		
TITLE	VPD		
NAME	SEIBELS III, HENRY G		
STREET ADDRESS	3924 GLENCOE DRIVE		
CITY-ST-ZIP	BIRMINGHAM, AL 35213		
TITLE	PD	DO NOT WRITE IN THIS SPACE	
NAME	SEIBELS, EDMUND K		
STREET ADDRESS	2871 BALMORAL RD		
CITY-ST-ZIP	BIRMINGHAM, AL 35223		
TITLE	SD		
NAME	SEIBELS, FRANCES E		
STREET ADDRESS	75 FAIRWAY DR.		
CITY-ST-ZIP	BIRMINGHAM, AL 35213		
TITLE	D	DO NOT WRITE IN THIS SPACE	
NAME	LITTLE, FRANCES S		
STREET ADDRESS	75 FAIRWAY DR		
CITY-ST-ZIP	BIRMINGHAM, AL 35213		
TITLE	D		
NAME	RUSSELL, KATERINE S		
STREET ADDRESS	75 FAIRWAY DR		
CITY-ST-ZIP	BIRMINGHAM, AL 35213		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: 		1/17/07 255-581-9227	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	