

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000005351

FILED
Jul 02, 2004
Secretary of State

Entity Name: SEAFAX, INC.

Current Principal Place of Business:

2 MONUMENT SQ
8TH FLOOR
PORTLAND, ME 04101

New Principal Place of Business:

Current Mailing Address:

P O BOX 15340
PORTLAND, ME 04101

New Mailing Address:

FEI Number: 01-0529012 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: WEATHERBIE, DAVID
Address: 2 MONUMENT SQUARE
City-St-Zip: PORTLAND, ME 04101

Title: P () Delete
Name: BABEN, GEORGE D
Address: 2 MONUMENT SQ
City-St-Zip: PORTLAND, ME 04101

Title: V () Delete
Name: BONNVIE, JAMES M
Address: 2 MONUMENT SQ
City-St-Zip: PORTLAND, ME 04101

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: WEATHERBIE, DAVID B
Address: 2 MONUMENT SQUARE
City-St-Zip: PORTLAND, ME 04101

Title: P (X) Change () Addition
Name: BABEU, GEORGE D
Address: 2 MONUMENT SQ
City-St-Zip: PORTLAND, ME 04101

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID B. WEATHERBIE

T

07/02/2004

Electronic Signature of Signing Officer or Director

_____ Date