## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # P93000081514**

SEL PLANTATION INVESTMENTS, INC.



Principal Place of Business

3718 SANDSPUR LA NOKOMIS, FL 34275 Mailing Address

PO BOX 943

OSPREY, FL 34229-0943

## **FILED** Feb 26, 2007 08:00 A Secretary of State



01312007 DO NOT WRITE IN THIS SPACE

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0463624

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LATTMANN, STEPHEN E 3718 SANDSPUR LA NOKOMIS, FL 34275

## DO NOT WRITE IN THIS SPACE

the obligat	named entity submits this statement for the plons of registered agent.	urpose of changing its registers	d office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered A				Agent signature required when reinstating) DATE		
FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		Election Campaign Finan     Trust Fund Contribution.	cing 🔲	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	CTORS		*** <del>*********************************</del>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVSD LATTMANN, MR STEPHEN E 3718 SANDSPUR LA NOKOMIS, FL 34275					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					U00000648793 03/07/07-80023-019 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				03/07/07-80023-019 150.00 <b>DO NOT WRITE</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-SI-ZIP						
TITLE						

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 receiven 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 attact prehip this, an actuess, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP