

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000114215

Entity Name: SEYBERT SALES COMPANY**Current Principal Place of Business:**4981 GARDEN DRIVE
DELRAY BCH, FL 33445**Current Mailing Address:**4981 GARDEN DRIVE
DELRAY BCH, FL 33445**FEI Number:** 43-1142326**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SEYBERT, TAMARA KVP
4981 GARDEN DRIVE
DELRAY BCH, FL 33445 US*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**Officer/Director Detail :**

Title	DPT
Name	SEYBERT,TRUSTEE, WILLIAM E
Address	4981 GARDEN DRIVE
City-State-Zip:	DELRAY BEACH FL 33445

Title	DVS
Name	CAPOZZOLI, TRACY K
Address	31 PRINCES GATE ROAD
City-State-Zip:	WISPERING PINES NC 28327

Title	DTR
Name	CAPOZZOLI, TRACY K
Address	31 PRINCESS GATE ROAD
City-State-Zip:	WISPERING PINES NC 28327

Title	DSE
Name	SEYBERT,TRUSTEE, TAMARA K
Address	4981 GARDEN DRIVE
City-State-Zip:	DELRAY BEACH FL 33445

I hereby 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 all other like empowered.

SIGNATURE: SEYBERT,TRUSTEE,WILLIAM E.**PRESIDENT****01/16/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date