# 2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F0200006390

Entity Name: SEGREST, INC.

# Current Principal Place of Business:

SEGREST INC 6180 BIG BEND ROAD GIBSONTON, FL 33534

### **Current Mailing Address:**

SEGREST INC. P.O. BOX 758 GIBSONTON, FL 33534

# FEI Number: 13-4226185

### Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 US FILED Jan 13, 2016 Secretary of State CC8349971725

Certificate of Status Desired: No

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

# Officer/Director Detail :

	Title	DIRECTOR	Title	SPECIAL ADVISOR TO PRESIDNET
	Name	O'NEILL, GEORGE JR.	Name	SEGREST, ELWYN
	Address	30 ROCKEFELLER PLAZA	Address	P.O. BOX 758
	City-State-Zip:	SUITE 5600 NEW YORK NY 10112-0245	City-State-Zip:	GIBSONTON FL 33534
	City-State-Zip.	NEW FORK INT TOTIZ-0245	Title	VP, TREASURER, SECRETARY
	Title	VP		
	Name	BRAMLETT, JACK	Name Address	PETIT, ROBERT W
	Address	P.O. BOX 758		30 ROCKEFELLER PLAZA SUITE 5600
	City-State-Zip:	GIBSONTON FL 33534	City-State-Zip:	NEW YORK NY 10112-0245
	Title	CHAIRMAN	Title	DIRECTOR
	Name	NASH, CLAUDE	Name	O'NEILL, PETER
	Address	30 ROCKEFELLER PLAZA SUITE 5600	Address	30 ROCKEFELLER PLAZA SUITE 5600
	City-State-Zip:	NEW YORK NY 10112	City-State-Zip:	NEW YORK NY 10112
	Title	VP, CFO	Title	DIRECTOR
	Name	JORDAN, KEVIN	Name	O'NEILL, DAVID
	Address	P.O. BOX 758	Address	30 ROCKEFELLER PLAZA
	City-State-Zip:	GIBSONTON FL 33534	City-State-Zip:	SUITE 5600 NEW YORK NY 10112

### Continues on page 2

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: KEVIN JORDAN

VICE PRESIDENT, CFO 01/13/2016

Electronic Signature of Signing Officer/Director Detail

Date

# **Officer/Director Detail Continued :**

Title	PRESIDENT	Title	DIRECTOR
Name	MOORE, SANDY	Name	CAULKINS, GAIL
Address	30 ROCKEFELLER PLAZA SUITE 5600	Address	30 ROCKEFELLER PLAZA SUITE 5600
City-State-Zip:	NEW YORK NY 10112	City-State-Zip:	NEW YORK NY 10112
Title	DIRECTOR		

NameBRODERICK, KEVINAddress30 ROCKEFELLER PLAZA<br/>SUITE 5600

City-State-Zip: NEW YORK NY 10112