

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**

**Feb 05, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # 275516**

1. Entity Name

SEABOARD COLD STORAGE, INC.



Principal Place of Business  
5601 N ANDERSON RD  
TAMPA FL 33614

Mailing Address  
POB 798  
TAMPA FL 33608



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/06)

4. FEI Number **59-1030417**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JEREMY E. GLUCKMAN  
707 N FRANKLIN ST  
9TH FLOOR  
TAMPA FL 33602

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee Will Be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete  
NAME GREENBAUM, ELLIOT M  
STREET ADDRESS 110 SOUTH 11TH STREET  
CITY-ST-ZIP TAMPA, FL 00000

TITLE S ☐ Delete  
NAME MINNER, ROBERT L  
STREET ADDRESS 110 SO. 11TH ST.  
CITY-ST-ZIP TAMPA FL

TITLE TDV ☐ Delete  
NAME GREENBAUM, LOIS  
STREET ADDRESS 110 S 11TH ST  
CITY-ST-ZIP TAMPA, FL 00000

TITLE D ☐ Delete  
NAME GREENBAUM, TOBA  
STREET ADDRESS 110 S 11TH ST  
CITY-ST-ZIP TAMPA, FL 00000

TITLE D ☐ Delete  
NAME KOGOD, SANDRA  
STREET ADDRESS 110 S. 11TH ST.  
CITY-ST-ZIP TAMPA FL

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
000000622631  
02/13/07-80034-008 150.00

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Robert L. Minner ROBERT L. MINNER 1-26-07 813-887-5984  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #