2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2004
Secretary of State

DOCUMENT# 400070

Entity Name: SEAWAKE, INC

Current Principal Place of Business:

3 SEASIDE LANE 302
BELLEAIR, FL 34616 US

New Principal Place of Business:

3 SEASIDE LANE 302
BELLEAIR, FL 33756 US

Current Mailing Address:

3 SEASIDE LANE 302
BELLEAIR, FL 34616 US

New Mailing Address:

3 SEASIDE LANE 302
BELLEAIR, FL 33756 US

FEI Number: 59-1389302 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PEACOCK, RAY J.
2438 SUNSET PT. ROAD SUITE B.
CLEARWATER, FL 34625

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: WAKELY, DAVID M,
Address: 3 SEASIDE LANE 302
City-St-Zip: BELLEAIR, FL 33756

Title: SD ( ) Delete
Name: WAKELY, FRANCES B.,
Address: S SEASIDE LANE 302
City-St-Zip: BELLEAIR, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: WAKELY, DAVID N,
Address: 3 SEASIDE LANE 302
City-St-Zip: BELLEAIR, FL 33756

Title: SD (X) Change ( ) Addition
Name: WAKELY, FRANCES B.,
Address: 3 SEASIDE LANE 302
City-St-Zip: BELLEAIR, FL 33756

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 N. WAKELY PD 01/05/2004

Electronic Signature of Signing Officer or Director Date