

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**

**Mar 26, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # 496779**

1. Entity Name

**GOLDEN SEAL SERVICES, INC.**



Principal Place of Business  
**3786 INDUSTRIAL PK DR**  
**MARIANNA FL 32446**

Mailing Address  
**3786 INDUSTRIAL PK DR**  
**MARIANNA FL 32446**



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 **59-1649294**

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

**MORRILL, RONALD S**  
**3786 INDUSTRIAL PARK DRIVE**  
**MARIANNA FL 32446**

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 registering)

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

T ☐ Delete  
NAME: **MORRILL, RONALD S**  
STREET ADDRESS: **3786 INDUSTRIAL PK DR**  
CITY-STATE-ZIP: **MARIANNA, FL 00000**

PD ☐ Delete  
NAME: **MORRILL, RONALD S**  
STREET ADDRESS: **3786 INDUSTRIAL PK DR**  
CITY-STATE-ZIP: **MARIANNA, FL 00000**

VP ☐ Delete  
NAME: **MORRILL, GREGORY O**  
STREET ADDRESS: **1616 BAY HAWK LANE**  
CITY-STATE-ZIP: **ST AUGUSTINE FL 32086**

S ☐ Delete  
NAME: **MORRILL, MARJORIE**  
STREET ADDRESS: **3786 INDUSTRIAL PARK DR**  
CITY-STATE-ZIP: **MARIANNA FL**

EVP ☐ Delete  
NAME: **MORRILL, MARJORIE**  
STREET ADDRESS: **3786 INDUSTRIAL PARK DRIVE**  
CITY-STATE-ZIP: **MARIANNA FL**

☐ Delete  
NAME:   
STREET ADDRESS:   
CITY-STATE-ZIP:

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☐ Change ☐ Addition  
NAME: **000000680158**  
STREET ADDRESS: **04/03/07-80067-006**  
CITY-STATE-ZIP: **150.00**

☐ Change ☐ Addition  
NAME:   
STREET ADDRESS:   
CITY-STATE-ZIP:

☐ Change ☐ Addition  
NAME:   
STREET ADDRESS:   
CITY-STATE-ZIP:

☐ Change ☐ Addition  
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CITY-STATE-ZIP:

☐ Change ☐ Addition  
NAME:   
STREET ADDRESS:   
CITY-STATE-ZIP:

☐ Change ☐ Addition  
NAME:   
STREET ADDRESS:   
CITY-STATE-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:**

*Ronald S Morrill*  
**RONALD S MORRILL**

**3-22-07**

Date

Daytime Phone #

**850-526-4286**