

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 575604

Entity Name: SEASONALL, INC.

**FILED**  
**May 14, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

201 N 15TH ST  
HAINES CITY, FL 33844

**New Principal Place of Business:**

205 N 15TH ST  
HAINES CITY, FL 33844

**Current Mailing Address:**

201 N 15TH ST  
HAINES CITY, FL 33844

**New Mailing Address:**

205 N 15TH ST  
HAINES CITY, FL 33844

FEI Number: 59-1832345

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

EPPERSON, WILLIAM D  
900 INGRAHAM AVE  
HAINES CITY, FL 33844 US

**Name and Address of New Registered Agent:**

EPPERSON, WILLIAM D  
205 N 15TH ST  
HAINES CITY, FL 33844 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: WILLIAM D. EPPERSON

05/14/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: EPPERSON, WILLIAM D  
Address: 205 N 15TH ST  
City-St-Zip: HAINES CITY, FL 33844

Title: ST  
Name: KING, CRYSTAL  
Address: 205 N 15 ST  
City-St-Zip: HAINES CITY, FL 33844

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: WILLIAM D. EPPERSON

PRES

05/14/2012

Electronic Signature of Signing Officer or Director

Date