


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 19, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 668058</b> 1. Entity Name SCEEE PRESS, INC.	
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Principal Place of Business 1101 MASSACHUSETTS AVE. ST. CLOUD, FL 34769-3733	Mailing Address 1101 MASSACHUSETTS AVE. ST. CLOUD, FL 34769-3733
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01222008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 23-7365171	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

EVERETT, W. W. JR.  
 1101 MASSACHUSETTS AVENUE  
 ST. CLOUD, FL 34769

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

000000831574  
 02/27/08-80025-011 158.75

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EVERETT, JR W W 1101 MASSACHUSETTS AVE ST CLOUD, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS TRAVER, LEANNE E. 1101 MASSACHUSETTS AVE. ST. CLOUD, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD EVERETT, WOODROW W III 1101 MASSACHUSETTE AVE ST CLOUD, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 lines empowered.

SIGNATURE: *W. W. Everett Jr.*  
 W. W. Everett, Jr., Director      2/13/2008      (804) 742-5611