


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 02, 2007 08:00 A**  
**Secretary of State**

<b>DOCUMENT # F00000001138</b> 1. Entity Name <b>SECO SOUTH, INC.</b>	
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Principal Place of Business <b>2111 34TH WAY LARGO, FL 33771</b>	Mailing Address <b>2111 34TH WAY LARGO, FL 33771</b>
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03142007 No Chg-P CR2E034 (11/05)

4. FEI Number <b>59-3640333</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  <b>EDWARDS, JOHN 2111 34TH WAY LARGO, FL 33771</b>
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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 \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00. After May 1, 2007 Fee will be \$550.00.</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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<b>10. OFFICERS AND DIRECTORS</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MACMILLAN, ARTHUR SOUTHMOOR LANE HAMPSHIRE ENGLAND PO91JJ,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD CHALMERS, NICHOLAS SOUTHMOOR LANE HAMPSHIRE ENGLAND PO1JJ,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT CIARLEGIO, EUGENE A 351 NEW WHITFIELD STREET GUILFORD, CT 06437
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DAS O'CONNELL, PETER SOUTHMOOR LANE HAMPSHIRE ENGLAND PO91JJ,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BLANTON, RANDOLPH 351 NEW WHITFIELD STREET GUILFORD, CT 06437
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000687903  
04/10/07-80059-004 150.00

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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 like empowered.

**SIGNATURE:**  **EUGENE A. CIARLEGIO** Assistant Treasurer 3/27/07 (203) 458-3163  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #