

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000004924

Entity Name: SEGONE INC.

FILED
Apr 18, 2005
Secretary of State

Current Principal Place of Business:

210 NORTH UNIVERSITY DRIVE, SUITE 208
CORAL SPRINGS, FL 330717392

New Principal Place of Business:

210 NORTH UNIVERSITY DRIVE
SUITE 208
CORAL SPRINGS, FL 330717392

Current Mailing Address:

210 NORTH UNIVERSITY DRIVE, SUITE 208
CORAL SPRINGS, FL 330717392

New Mailing Address:

210 NORTH UNIVERSITY DRIVE
SUITE 208
CORAL SPRINGS, FL 330717392

FEI Number: 52-2384285

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONKLING, STEVE PCD
210 NORTH UNIVERSITY DRIVE, SUITE 208
CORAL SPRINGS, FL 330717392 US

Name and Address of New Registered Agent:

CONKLING, STEVE PCD
210 NORTH UNIVERSITY DRIVE
SUITE 208
CORAL SPRINGS, FL 330717392 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:

04/18/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCD () Delete
Name: CONKLING, STEVE
Address: 210 NORTH UNIVERSITY DRIVE, SUITE 208
City-St-Zip: CORAL SPRINGS, FL 330717392

Title: D () Delete
Name: WLADYKA, GREG
Address: 210 NORTH UNIVERSITY DRIVE, SUITE 208
City-St-Zip: CORAL SPRINGS, FL 330717392

Title: D () Delete
Name: BISHINS, SCOTT
Address: 210 NORTH UNIVERSITY DRIVE, SUITE 208
City-St-Zip: CORAL SPRINGS, FL 330717392

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: STEVE CONKLING

PCD

04/18/2005

Electronic Signature of Signing Officer or Director

Date