

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007 8:00 am
Secretary of State

04-23-2007 90073 034 ***150.00

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1. Entity Name
SEABOARD SOLUTIONS, INC.



40075391



Principal Place of Business
**8001 NW 79TH AVE
MIAMI, FL 33168**

Mailing Address
**9000 WEST 67TH STREET
ATTN: TAX DEPT.
MERRIAM, KS 66202**

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

04062007 Chg-P CR2E034 (12/06)

4. FEI Number
20-0673554

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525**

7. Name and Address of New Registered Agent

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 reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	C	<input checked="" type="checkbox"/> Delete
NAME	BRESKY, H. HARRY	
STREET ADDRESS	822 BOYLSTON ST, STE 301	
CITY-ST-ZIP	CHESTNUT HILL, MA 02467	
TITLE	VTD	<input type="checkbox"/> Delete
NAME	STEER, ROBERT L	
STREET ADDRESS	9000 WEST 67TH ST	
CITY-ST-ZIP	MERRIAM, KS 66202	
TITLE	ASV	<input type="checkbox"/> Delete
NAME	CROUTCH, WILLIAM H	
STREET ADDRESS	8001 NW 79TH AVE	
CITY-ST-ZIP	MIAMI, FL 33166	
TITLE	VS	<input type="checkbox"/> Delete
NAME	BECKER, DAVID M	
STREET ADDRESS	9000 WEST 67TH ST	
CITY-ST-ZIP	MERRIAM, KS 66202	
TITLE	V	<input type="checkbox"/> Delete
NAME	ARTIDIELLO, HEIDI	
STREET ADDRESS	8001 NW 79TH AVE	
CITY-ST-ZIP	MIAMI, FL 33166	
TITLE	V	<input type="checkbox"/> Delete
NAME	BRECHISEN, BRUCE A	
STREET ADDRESS	8001 NW 79TH AVE	
CITY-ST-ZIP	MIAMI, FL 33166	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Steven J. Bresky	
STREET ADDRESS	9000 West 67th Street	
CITY-ST-ZIP	Merriam, KS 66202	
TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Maria D. Lanzas	
STREET ADDRESS	8001 NW 79th Avenue	
CITY-ST-ZIP	Miami, FL 33166	
TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Edward A. Gonzalez	
STREET ADDRESS	8001 NW 79th Avenue	
CITY-ST-ZIP	Miami, FL 33166	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert Steer

4/12/07

Date

(913) 676-8800

Daytime Phone #