

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000000909

FILED
Jan 14, 2009
Secretary of State

Entity Name: SECO & GOLDEN "100" INC.

Current Principal Place of Business:

1600 ESSEX AVE
DELAND, FL 32724

New Principal Place of Business:

Current Mailing Address:

1600 ESSEX AVE
DELAND, FL 32724

New Mailing Address:

FEI Number: 58-0619566

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HORVATH, PETER
Address: 1600 ESSEX AVE
City-St-Zip: DELAND, FL 32724

Title: C () Delete
Name: MURFIELD, KEITH
Address: 2008 S. HARDY DRIVE
City-St-Zip: TEMPE, AZ 85285

Title: VC () Delete
Name: JOHNSON, ED
Address: 1520 WOODROW STREET NE
City-St-Zip: SALEM, OR 97303

Title: ST () Delete
Name: GRABOW, DEAN
Address: 101 S SWIFT AVE
City-St-Zip: LITCHFIELD, MN 55355

Title: EC () Delete
Name: BOELEN, DON
Address: 247 RESEARCH PARKWAY
City-St-Zip: DAVENPORT, IA 52802

Title: EC (X) Delete
Name: TRUMMEL, ERIC
Address: 61495 SHATTUCK ROAD
City-St-Zip: PORTLAND, OR 97221

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:

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

Title: EC (X) Change () Addition
Name: TRUMMEL, ERIC
Address: 61495 SHATTUCK ROAD
City-St-Zip: PORTLAND, OR 97221

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: PETER HORVATH

P

01/14/2009

Electronic Signature of Signing Officer or Director

Date