

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08832

FILED
May 11, 2007
Secretary of State

Entity Name: SEAGROVE ON THE BEACH REALTY, INC.

Current Principal Place of Business:

3010 S CTY HWY 395
SEAGROVE BEACH FL, 32459 US

Current Mailing Address:

3010 S CTY HWY 395
SANTA ROSA BCH, FL 32459 US

New Principal Place of Business:

5311 EAST COUNTY HWY 30A
SUITE #4
SEAGROVE BEACH, FL 32459 US

New Mailing Address:

5311 EAST COUNTY HWY 30A
SUITE #4
SEAGROVE BEACH, FL 32459 US

FEI Number: 59-2054014

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRAWFORD, DONNA
3010 S CTY HWY 395
SEAGROVE BEACH, FL 32459 US

Name and Address of New Registered Agent:

CRAWFORD, DONNA
5311 EAST COUNTY HWY 30A
SEAGROVE BEACH, FL 32459 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:

05/11/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VPS () Delete
Name: CRAWFORD, MARGARET
Address: 3010 S CTY HWY 395
City-St-Zip: SEAGROVE BEACH, FL 32459

Title: PT (X) Delete
Name: CRAWFORD, DONNA
Address: 3010 S CO HWY 395
City-St-Zip: SEAGROVE, FL 32459

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVPT (X) Change () Addition
Name: CRAWFORD, DONNA
Address: 5311 EAST COUNTY HWY 30A
City-St-Zip: SEAGROVE BEACH, FL 32459

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: DONNA CRAWFORD

PVST

05/11/2007

Electronic Signature of Signing Officer or Director

Date