2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000004798

Entity Name: SEA MARKET, INC.

FILED Apr 25, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

OLD SHRIMP ROAD STOCK ISLAND KEY WEST, FL 33040

Current Mailing Address: New Mailing Address:

% BETTY W. GULLEY, EA
3028 PAINTED VALLEY
LITTLE ROCK, AR 72212

ATTN: LARRY FOLTZ, JR.
PO BOX 2479
KEY WEST, FL 33040

FEI Number: 64-0734230 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HERRING, TONY
POST BOX
FT MYERS, FL 34119
US
FOLTZ, JR., LARRY
OLD SHRIMP ROAD
PO BOX 2479
KEY WEST, FL 33040 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: LARRY FOLTZ, JR 04/25/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 HEMMENWAY, BRAD
 Name:
 RENIER, CHARLES

 Address:
 101 HOUSTON AVENUE
 Address:
 PO BOX 2479

 City-St-Zip:
 PT. ARTHUR, TX 77640
 City-St-Zip:
 KEY WEST, FL 33040

Title: VB (X) Delete Title: () Change () Addition

 Name:
 HEMMENWAY, JACK
 Name:

 Address:
 101 HOUSTON AVENUE
 Address:

 City-St-Zip:
 PT. ARTHUR, TX 77640
 City-St-Zip:

Title: T (X) Delete Title: () Change () Addition

 Name:
 STRINGFELLOW, JIM
 Name:

 Address:
 101 HOUSTON AVE.
 Address:

 City-St-Zip:
 PT. ARTHUR, TX 77640
 City-St-Zip:

Title: S (X) Delete Title: () Change () Addition

 Name:
 HERRING, TONY
 Name:

 Address:
 11831 NIGHT HERON DRIVE
 Address:

 City-St-Zip:
 NAPLES, FL 34119
 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: CHARLES RENIER PRES 04/25/2005