


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 09, 2005 08:00 AM
Secretary of State

DOCUMENT # F97000002470
1. Entity Name
SEA SAFE GATOR GRATE, INC.



Principal Place of Business Mailing Address
209 GLASER DRIVE 209 GLASER DRIVE
LAFAYETTE, LA 70508 US LAFAYETTE, LA 70508 US

DO NOT WRITE IN THIS SPACE



02282005 No Chg-P CR2E034 (10/03)

4. FEI Number 72-0849427	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FREHN, JEFFREY L
106 EAST COLLEGE AVENUE, SUITE 1200
TALLAHASSEE, FL 32301

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CEO OUTCAULT, THOMAS 209 GLASER DRIVE LAFAYETTE, LA 70508
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CSD BAIRD, WILLIAM S 3245 FAYETTE AVENUE BIRMINGHAM, AL 35208
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P SHORT, ROLAND T JR. 3245 FAYETTE AVENUE BIRMINGHAM, AL 35208
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VGM DEROUEN, LYNN 209 GLASER DR LAFAYETTE, LA 70508
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V DOMENGEAUX, DAVID 209 GLASER DR LAFAYETTE, LA 70508
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

1100000256298
03/09/05-80009-018 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(f), 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: David Domengeaux David Domengeaux 2/28/05 337-406-2345
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #