

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G68598

FILED
Apr 30, 2008
Secretary of State

Entity Name: SEALIFT TERMINALS, INC.

Current Principal Place of Business:

3971 DOCTORS LAKE DR
ORANGE PARK, FL 32065 US

New Principal Place of Business:

Current Mailing Address:

3971 DOCTORS LAKE DR
ORANGE PARK, FL 32065 US

New Mailing Address:

FEI Number: 59-2396872 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURGSTINER, W A III
3971 DOCTORS LAKE DR
ORANGE PARK, FL 32065 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: PD () Delete
Name: BURGSTINER, WILLIAM, A, JR
Address: 3971 DOCTORS LAKE DR
City-St-Zip: ORANGE PARK, FL 32065

Title: ST () Delete
Name: VANTASSEL, CHARLES,
Address: 1500 N. POST OAK DR.#140
City-St-Zip: HOUSTON, TX

Title: VD () Delete
Name: VANTASSEL, CHARLES,
Address: 1500 N. POST OAK DR.#140
City-St-Zip: HOUSTON, TX

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BURGSTINER, W A JR
Address: 3971 DOCTORS LAKE DR
City-St-Zip: ORANGE PARK, FL 32065

Title: ST (X) Change () Addition
Name: VAN TASSEL, CHARLES
Address: 1500 N. POST OAK DR.#140
City-St-Zip: HOUSTON, TX

Title: VD (X) Change () Addition
Name: VAN TASSEL, CHARLES
Address: 1500 N. POST OAK DR.#140
City-St-Zip: HOUSTON, TX

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: W A BURGSTINER, III

VP

04/30/2008

Electronic Signature of Signing Officer or Director

Date