

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H02320

Entity Name: ED SEAY, INC.

FILED  
Mar 09, 2005  
Secretary of State

## Current Principal Place of Business:

574 PONTE VEDRA BLVD.  
PONTE VEDRA,, FL 320822316

## New Principal Place of Business:

## Current Mailing Address:

574 PONTE VEDRA BLVD.  
PONTE VEDRA,, FL 320822316

## New Mailing Address:

572 PONTE VEDRA BLVD.  
PONTE VEDRA,, FL 320822316

FEI Number: 59-2403422

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

THODE, DEBORAH L  
574 PONTE VEDRA BLVD  
PONTE VEDRA, FL 32082 US

## Name and Address of New Registered Agent:

THODE, DEBORAH L  
572 PONTE VEDRA BLVD  
PONTE VEDRA, FL 32082 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: DEBORAH THODE

03/09/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: ST ( ) Delete  
Name: THODE, DEBORAH L  
Address: 574 PONTE VEDRA BLVD.  
City-St-Zip: QONTE VEDRA, FL 32082

Title: DP ( ) Delete  
Name: SEAY, EDWIN B.,  
Address: 574 PONTE VEDRA BLVD.  
City-St-Zip: PONTE VEDRA, FL 32082

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ST (X) Change ( ) Addition  
Name: THODE, DEBORAH L  
Address: 572 PONTE VEDRA BLVD.  
City-St-Zip: PONTE VEDRA, FL 32082

Title: DP (X) Change ( ) Addition  
Name: SEAY, EDWIN B.,  
Address: 572 PONTE VEDRA BLVD.  
City-St-Zip: PONTE VEDRA, FL 32082

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: DEBORAH THODE

ST

03/09/2005

Electronic Signature of Signing Officer or Director

Date