2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

FILED Feb 05, 2007 08:00 AM **Secretary of State**

DOCUMENT # J49001

1. Entity Name SEAY GROVES, INC.

Principal Place of Business

Mailing Address

221 WES MANN RD.

P OB OX 740

PO BOX 740 BABSON PARK, FL 33827

BABSON PARK, FL 33827-0740 US



01182007

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-2747813 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6.	Name	and Add	ress of	Current	Registe	red Agent

SEAY, JAMES P 221 WES MANN RD BABSON PARK, FL 33827

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	named entity submits this statement for the plans of registered agent.	ourpose of changing its reg	stered office	or registered agent, or b	both, in the State of Florida. I am familiar with, and accept
SIGNATURE.					
	Signature, typed or printed name of registered agent and title	if applicable. (NOTE: Rec	istered Agent sign	eture required when reinstating)	DATE
	E NOWIII FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign I Trust Fund Contribu	~ _	\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS					
TITLE	PVSD		ì		
NAME	SEAY, JAMES P PVSD				
STREET ADDRESS	221 WESMANN RD				U00000621082
CITY-ST-ZIP	BABSON PARK, FL 33827				02/12/07-80002-020 150.0
TITLE	TD				
NAME	WHATLEY, ELIZABETH S TD		ŀ		
STREET ADDRESS	900 DELA RESOLIE AVE				

CITY-ST-ZIP BARTOW, FL 33830 STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE

STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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. James P. Sea

SIGNATURE:

TITLE

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

863-678-1338