

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 18, 2007 08:00 AM
Secretary of State

DOCUMENT # J49359

1. Entity Name
SEAY ENTERPRISES, INCORPORATED



Principal Place of Business
POST OFFICE BOX 375
TALLAHASSEE, FL 32302

Mailing Address
POST OFFICE BOX 375
TALLAHASSEE, FL 32302



04132007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2816706

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

HARTSFIELD, PAUL F. JR.
4913 N. MONROE ST
TALLAHASSEE, FL 32303

**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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE **P**
NAME **SEAY, BUBBA**
STREET ADDRESS **3938 BOBBINBROOK CIRCLE**
CITY-ST-ZIP **TALLAHASSEE, FL**

TITLE **S**
NAME **SEAY, KENNETH**
STREET ADDRESS **4340 SHERBORNE RD**
CITY-ST-ZIP **TALLAHASSEE, FL 32303**

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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000000714753
04/27/07-80034-023 150.00

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE: Bubba Seay **BUBBA SEAY PRESIDENT**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #