2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 16, 2006 8:00 am Secretary of State DOCUMENT # J72757 02-27-2006 90067 018 ***150.00 SEMINOLE TRAIL, INC. Principal Place of Business Mailing Address ONE WOODLAND DR. PUNTA GORDA FL 33982 ONE WOODLAND DR. PUNTA GORDA FL 33982 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) City & State City & State Applied For 4. FEI Number 65-0014556 Not Applicable Zio Country Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent JOHNS, ALFRED M. Street Address (P.O. Box Number is Not Acceptable) ONE WOODLAND DR **PUNTA GORDA FL 33982** City Zip Code 8. The above named only or the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept SIGNATURE (NOTE: Registured Agers signature required when reinstaling) FILE NOW! FEE IS \$150.00 \$5.00 May Be 9. Election Campaign Financing After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. RILE Ocieta TIRE Addition NAME JOHNS, ALFRED M. NAME STREET ADDRESS ONE WOODLAND DR STREET ADDRESS CITY-ST-7IP PUNTA GORDA FL CITY-ST-ZIP Delete MILE TITLE ☐ Chance ☐ Addition SAFRON, ELWOOD P. NAME STREET ADDRESS 871 CONREID DR STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL CITY-ST-ZIP TITLE Delute TITLE □ Change Addition NAME HARPER, DANIEL NAME STREET ADDRESS 6718 DANIEL CT, RT 5 STREET ADDRESS CITY-ST-71P CITY-ST-ZIP FT MYERS FL Detete TITLE ☐ Change ☐ Addition JOHNS, ALFRED M. NAME NAME ONE WOODLAND DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PUNTA GORDA FL CITY-ST-ZIP MLE Oelete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7P CITY-S1-ZIP TITLE Delete TITLE ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 cath; that I am an officer or director of the corporation or the receiver or trustee empowered of execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 of the corporation or the receif if changed, or on an attampte SIGNATURE:

FILED



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 2, 2006

SEMINOLE TRAIL, INC. ONE WOODLAND DR. PUNTA GORDA, FL 33982

Subject: SEMINOLE TRAIL, INC.

Reference Number:

J72757

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/CJ ANNUAL REPORTS SECTION