

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000003986

Entity Name: SEHGA, INC.

FILED
Mar 09, 2009
Secretary of State

Current Principal Place of Business:

4351 MAYLOR RD.
TALLAHASSEE, FL 32308

New Principal Place of Business:

Current Mailing Address:

4351 MAYLOR RD.
TALLAHASSEE, FL 32308

New Mailing Address:

FEI Number: 59-3621895

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADKINS, GWENDOLYN P
1319 THOMASWOOD DR.
TALLAHASSEE, FL 32312 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: MCEWAN PALMER, SHARON
Address: 1519 DEMPSEY MAYO RD.
City-St-Zip: TALLAHASSEE, FL 32308

Title: TD () Delete
Name: PALMER GOULD, ELIZABETH
Address: 4351 MAYLOR RD.
City-St-Zip: TALLAHASSEE, FL 32308

Title: SD () Delete
Name: PALMER ADKINS, GWENDOLYN
Address: 1319 THOMASWOOD RD.
City-St-Zip: TALLAHASSEE, FL 32312

Title: D () Delete
Name: PALMER, WALDO HAROLD JR.
Address: 4364 MAYLOR RD
City-St-Zip: TALLAHASSEE, FL 32308

Title: D () Delete
Name: PALMER, JUANITA ANN
Address: % 1519 DEMPSEY MAYO RD.
City-St-Zip: TALLAHASSEE, FL 32308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ELIZABETH PALMER GOULD

TREA

03/09/2009

Electronic Signature of Signing Officer or Director

Date