## **2007 FOR PROFIT CORPORATION**

## ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

**DOCUMENT # P00000016769** 

SEL W.V. DEVELOPMENT NO. 3, INC.



**FILED** Feb 26, 2007 08:00 A Secretary of State

Principal Place of Business

Mailing Address

3718 SANDSPUR LA NOKOMIS, FL 34275

POST OFFICE BOX 943 OSPREY, FL 34229-0943 US



01312007

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0983912 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LATTMANN, STEPHEN E 3718 SANDSPUR LA NOKOMIS, FL 34275

## 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 or registered agent and title if applicable (NOTF: Registered Agent signature required when reinstating)  DATE							
File NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		Election Campaign Finant Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MR LATTMANN, STEPHEN E 3718 SANDSPUR LA NOKOMIS, FL 34275		-		U00000648795		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					03/07/07-80023-016 150.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE		
NAME STREET ADDRESS CITY - ST-ZIP			IN THIS SPACE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE							

12. Thereby 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 accrees, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP