2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000029308

Entity Name: SEACREST VENTURES, INC.

FILED Apr 30, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

40001 EMERALD COAST PKWY. 42 BUSINESS CENTRE DRIVE

DESTIN, FL 32541 SUITE 401

MIRAMAR BEACH, FL 32550 US

Current Mailing Address: New Mailing Address:

40001 EMERALD COAST PKWY. 42 BUSINESS CENTRE DRIVE

DESTIN, FL 32541 SUITE 401

MIRAMAR BEACH, FL 32550 US

FEI Number: 59-3634911 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WARD, LORI ELLEN ESQ MATTHEWS & HAWKINS, P.A. 4475 LEGENDARY DR. BOX 40 DESTIN, FL 32541 US

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: () Change () Addition

 Name:
 ADKINSON, W. MICHAEL
 Name:

 Address:
 502 GREENWAY COVE
 Address:

 City-St-Zip:
 NICEVILLE, FL 32578
 City-St-Zip:

Title: VPS () Delete Title: VPS (X) Change () Addition

Name: ADKINSON, CHAD Name: ADKINSON, CHAD
Address: 40001 EMERALD COAST PARKWAY Address: 145 ACACIA STREET

City-St-Zip: DESTIN, FL 32541 City-St-Zip: SANTA ROSA BEACH, FL 32459 US

Title: VPT () Delete Title: VPT (X) Change () Addition

 Name:
 ADKINSON, WAYNE
 Name:
 ADKINSON, WAYNE

 Address:
 298 74 US HWY 331 SOUTH
 Address:
 298 74 US HWY 331 SOUTH

 City-St-Zip:
 FREEPORT, FL 32439
 City-St-Zip:
 FREEPORT, FL 32439 US

Title: VΡ () Delete Title: VΡ (X) Change () Addition DEVARONA, ENRIQUE J DEVARONA, ENRIQUE J Name: Name: Address: 407 EVANS ROAD Address: 324 CYPRESS BREEZE BLVD City-St-Zip: NICEVILLE, FL 32578 US City-St-Zip: SANTA ROSA BEACH, FL 32459 US

I hereby certify that the information supplied with this filing does not qualify for the 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: MIKE ADKINSON P 04/30/2006