2006 FOR PROFIT CORPORATION **ANNUAL REPORT** DOCUMENT # P00000078002 1. Entity Name SEAGROVE SOUTHERN SHORES, INC. Principal Place of Business Mailing Address 1860 REPUBLICA DECUBA 1860 REPUBLICA DECUBA TAMPA, FL 33605 TAMPA, FL 33605 01062006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number

FILED Jan 11, 2006 08:00 AM Secretary of State

Applied For

813.248.9258

Davime Phone #

1.6.06

				59-367	3703		Not Applicable
				5. Certificate	of Status Desired	□ \$	8.75 Additional se Required
	6. Name and Address of Current Regis	tered Agent			······································		
SERAFIN, HEATHER P 2912 MOSSY TIMBER TRAIL VALRICO, FL 33594			DO NOT WRITE IN THIS SPACE				
	named entity submits this statement for the ptions of registered agent.	urpose of changing its registere	d office or rec	istered agent, or bot	h, in the State of Flo	ida, I am far	miliar with, and accept
Signature, typed or printed name of registered agent and title if applicable (NOTE. Registered				gent signature required when reinstating) DATE			
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	 Election Campaign Finance Trust Fund Contribution. 	cing 🔲	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	TORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D CHANCEY, WALTON H 46 ADALIA AVENUE TAMPA, FL 33606				01/12/06–	382605 90017-(024 150.00
STREET ADDRESS CITY-ST-ZIP TITLE							
NAME STREET ADDRESS CITY-ST-ZIP				-	NOT W		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN 7	THIS SP	ACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
12. I hereby of indicated of the corchanged,	certify that the information supplied with this fit on this report or supplemental report is true a reportation or the receiver or trustee empowered, or on an attachment with an address, with al	ling does not qualify for the exe and accurate and that my signate to execute this report as requir other like empowered.	mptions conti ure shall have ed by Chapte	nined in Chapter 119 the same legal effect r 607, Florida Statute	, Florida Statutes. I t as if made under o s; and that my name	further certify ath; that I am appears in I	that the information an officer or director Block 10 or Block 11 if

SIGNATURE: