2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P00000114215

Entity Name: SEYBERT SALES COMPANY

FILED Feb 29, 2008 Secretary of State

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

4981 GARDEN DR 2420 HAMPTON BRIDGE ROAD DELRAY BCH, FL 33445

DELRAY BCH, FL 33445

Current Mailing Address: New Mailing Address:

4981 GARDEN DR 2420 HAMPTON BRIDGE ROAD DELRAY BCH, FL 33445 DELRAY BCH, FL 33445

FEI Number: 43-1142326 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SEYBERT, TAMARA K VON GUNTEN, TYE F 4981 GARDEN DR 2420 HAMPTON BRIDGE ROAD DELRAY BCH, FL 33445 US DELRAY BCH, FL 33445

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: TYE F. VON GUNTEN 02/29/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

SEYBERT, WILLIAM E VON GUNTEN, TYE F Name: Name: 4981 GARDEN DR 2420 HAMPTON BRIDGE ROAD Address: Address: City-St-Zip: DELRAY BEACH, FL 33445 City-St-Zip: DELRAY BEACH, FL 33445

Title: DVS Title: DVS (X) Change () Addition () Delete Name: SEYBERT, TAMARA K Name: CAPOZZOLI, TRACY K

4981 GARDEN DR 3 VIERVIELLE CIRCLE Address: Address: DELRAY BCH, FL 33445 ELGIN AFB, FL 32542 City-St-Zip: City-St-Zip:

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

SEYBERT, TAMARA K CAPOZZOLI, TRACY K Name: Name: 4981 GARDEN DR 3 VIERVIELLE CIRCLE Address: Address: City-St-Zip: DELRAY BCH, FL 33445 City-St-Zip: ELGIN AFB, FL 32542

Title: DSE () Delete Title: DSE (X) Change () Addition SEYBERT, WILLIAM E VON GUNTEN, TYE F Name: Name: Address: 4981 GARDEN DR Address: 2420 HAMPTON BRIDGE ROAD City-St-Zip: City-St-Zip: DELRAY BEACH, FL 33445 DELRAY BEACH, FL 33445

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: TYE F VON GUNTEN **DPT** 02/29/2008