

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000061383

Entity Name: ST. SEBASTIAN FENCE COMPANY

FILED
Apr 23, 2009
Secretary of State

Current Principal Place of Business:

155 EAST LAKE BRANTLEY DRIVE
LONGWOOD, FL 32779

New Principal Place of Business:

540 N. STATE ROAD 434
SUITE 174
ALTAMONTE SPRINGS, FL 32714 21

Current Mailing Address:

P.O. BOX 915041
LONGWOOD, FL 32791

New Mailing Address:

FEI Number: 59-3728526 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRANT, DIANNE
1789 MADISON IVY CIR
APOPKA, FL 32712 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: P () Delete
Name: KINNEY, WAYNE E
Address: 1789 MADISON IVY CIR
City-St-Zip: APOPKA, FL 32712

Title: VP () Delete
Name: GRANT, DIANNE
Address: 1789 MADISON IVY CIR
City-St-Zip: APOPKA, FL 32712

Title: SECR () Delete
Name: GRANT, DIANNE
Address: 1789 MADISON IVY CIRCLE
City-St-Zip: APOPKA, FL 32712

Title: TREA (X) Delete
Name: JONES, LAWRENCE
Address: 8404 TROUTMAN STREET
City-St-Zip: ORLANDO, FL 32825

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:

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: DIANNE GRANT

VP

04/23/2009

Electronic Signature of Signing Officer or Director

Date