

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Feb 22, 2007 08:00 AM
Secretary of State

DOCUMENT # P04000022015

1. Entity Name
SEAMAN'S AQUA CLEAN, INC



Principal Place of Business
230 W. HOWARD ST.
LIVE OAK, FL 32064

Mailing Address
P. O. BOX 961
LIVE OAK, FL 32064



01112007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
27-0078859

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SEAMAN, JENNIFER M
1322 EUCLID ST.
LIVE OAK, FL 32064

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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 of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

0000000643657
03/02/07-80011-002 150.00

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PS
SEAMAN, JENNIFER M
1322 EUCLID ST.
LIVE OAK, FL 32064

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VTD
SEAMAN, JOHN G
1322 EUCLID ST.
LIVE OAK, FL 32064

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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IN THIS SPACE

12. I hereby 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 address, with all other like empowered.

SIGNATURE: *Jennifer Seaman* JENNIFER M. SEAMAN, PRESIDENT

Date

Daytime Phone #