2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000050557

City-St-Zip:

EUSTIS, FL 32736

FILED Apr 14, 2008 Secretary of State

Entity Na	me: SENEC	A PARTNERS, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
120 N. BAY STREET EUSTIS, FL 32726			10 W. LAKEVIEW AV EUSTIS, FL 32726	10 W. LAKEVIEW AVENUE EUSTIS, FL 32726	
Current M	lailing Addre	ess:	New Mailing Addre	New Mailing Address:	
120 N. BAY STREET EUSTIS, FL 32726			10 W. LAKEVIEW AV EUSTIS, FL 32726	10 W. LAKEVIEW AVENUE EUSTIS, FL 32726	
FEI Number	: 42-1663945	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
ROBERTS, ANTHONY L 120 N. BAY STREET EUSTIS, FL 32726 US				BLANCHARD, CLAYTON H 35 EAST PINEHURST BLVD EUSTIS, FL 32726 US	
	e named entity e of Florida.	submits this statement for the	purpose of changing its register	ed office or registered agent, or both,	
SIGNATU	RE: CLAYTO	ON H. BLANCHARD		04/14/2008	
	Electro	onic Signature of Registered Ag	jent	Date	
Election Ca	mpaign Financi	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D (ROBERTS, A 1240 LAKEVI EUSTIS, FL (EW DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (CRIDER, MAI 2708 OAK LY EUSTIS, FL:	NN STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	D (CORDLE, DA 20804 CR 44		Title: Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: DANNIE J. CORDLE D 04/14/2008