2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000112203

Current Principal Place of Business:

Entity Name: SEABREEZE MOBILE DETAILING, INC.

FILED Feb 25, 2006 Secretary of State

Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:	
FEI Number: 20-3292196 FEI I	Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
102 WHISPERING PINES COU SANTA ROSA BEACH, FL 324		2467 KINGSTON RD CRESTVIEW, FL 32536	US
Current Mailing Address:		New Mailing Address:	
102 WHISPERING PINES COL SANTA ROSA BEACH, FL 324		2467 KINGSTON RD CRESTVIEW, FL 32536	US

GODBEE, BRITTANY S GRIFFITH, JONATHAN E
102 WHISPERING PINES COURT 2467 KINGSTON RD
SANTA ROSA BEACH, FL 32459 US CRESTVIEW, FL 32536 US

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: JONATHAN E. GRIFFITH 02/25/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

New Principal Place of Business:

(X) Change () Addition Title: () Delete Title: GODBEE, JOSEPH H III GRIFFITH, JONATHAN E Name: Name: 102 WHISPERING PINES COURT 2467 KINGSTON RD Address: Address: City-St-Zip: SANTA ROSA BEACH, FL 32459 US City-St-Zip: CRESTVIEW, FL 32536 US Title: VΡ () Delete Title: VΡ (X) Change () Addition GRIFFITH, DEBORAH R Name: GODBEE, BRITTANY S Name: 102 WHISPERING PINES COURT Address: 2467 KINGSTON RD Address: SANTA ROSA BEACH, FL 32459 US CRESTVIEW, FL 32536 US City-St-Zip: City-St-Zip: Title: Title: () Change (X) Addition () Delete Name: GRIFFITH, DAVID Name:

 Name:
 Name:
 GRIFFITH, DAVID

 Address:
 Address:
 1961 SUNNYHILLS BLVD

 City-St-Zip:
 City-St-Zip:
 CHIPLEY, FL 32428

 Title:
 () Delete
 Title:
 O () Change (

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

 Name:
 Name:
 GRIFFITH, JOHNNIE

 Address:
 Address:
 3162 JAMES KENNEDY ROAD

 City-St-Zip:
 City-St-Zip:
 CRESTVIEW, FL 32539

I hereby certify that the information supplied with this filing does not qualify for the 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: BRITTANY S. GODBEE FVP 02/25/2006