

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000101737

Entity Name: SEAGIS NOVA 95, INC.

FILED
Mar 20, 2009
Secretary of State

Current Principal Place of Business:

ONE TOWER BRIDGE, 100 FRONT ST., STE. 1370
C/O SEAGIS PROPERTY GROUP
WEST CONSHOHOCKEN, PA 19428

New Principal Place of Business:

Current Mailing Address:

ONE TOWER BRIDGE, 100 FRONT ST., STE. 1370
C/O SEAGIS PROPERTY GROUP
WEST CONSHOHOCKEN, PA 19428

New Mailing Address:

FEI Number: 26-1125975 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
515 E. PARK AVE.
TALLAHASSEE, FL 32301 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: BEGIER, JOHN
Address: ONE TOWER BRIDGE, 100 FRONT ST., STE. 1370
City-St-Zip: WEST CONSHOHOCKEN, PA 19428

Title: V () Delete
Name: LEE, CHARLES
Address: ONE TOWER BRIDGE, 100 FRONT ST., STE. 1370
City-St-Zip: WEST CONSHOHOCKEN, PA 19428

Title: ST () Delete
Name: MOYER, KENNETH
Address: ONE TOWER BRIDGE, 100 FRONT ST., STE. 1370
City-St-Zip: WEST CONSHOHOCKEN, PA 19428

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:

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: KENNETH MOYER

ST

03/20/2009

Electronic Signature of Signing Officer or Director

_____ Date