## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Morthani

Secretary of State

DIVISION OF CORPORATIONS

1996

P94000024413 (4) DOCUMENT # 1. Corporation Name

TROY SEAY, INCORPORATED				
Principal Place of Business	Maling Address			4610  661)\$
P O BOX 7153 GAINESVILLE FL 32605	P O BOX 7153 GAINESVILLE FL 32605	5		
			<ol> <li>Date Incorporated or Qualified</li> <li>04/01/1994</li> </ol>	3a. Date of Last Report 05/01/1995
, Principal Place of Business	2a. Mailing Address		4, FEI Number	Applied For Not Applicable
	26		59-3233429	\$8.75 Additional
Suite, Apt. #, etc. 1	Suite Apt. #, etc		5. Certificate of Status Desired	Fee Required
City & State	City & State		Election Campaign Financing     Trust Fund Contribution	S5.00 May Be Added to Fees
Zip Country	Zip	Country	8. This corporation has liability for	intangible tax under s. 199.032,
25	29	[30]		No
g. Name and Address of Cur	rent Registered Agent		10. Name and Address of New F	legistered Agent
1		81 Name		
SEAY, TROY'F		82 Street Add	ress (P.O. Box Number is Not Acceptat	ole)
7625 NW 51ST DRIVE		83		
Gainesville FL 32653				
		<b>84</b> City		FL 85 Zip Code
or registered agent, or both, in the State of F familiar with, and accept the obligations of, S		i.		
or registered agent, or both, in the State of F familiar with, and accept the obligations of, \$ SIGNATURE  Signature, by state to be trace of recolerate OFFICERS.	gerector (was de (18) AND DRECTORS	Tit Falpstone (Augmit segmat no noticen	ad when remoduling	EVATE FICERS AND DIRECTORS IN 12
or registered agent, or both, in the State of F familiar with, and accept the obligations of SSIGNATURE  State, in factor parted when of registered to the Conference of the C	புந்தா ஐ.11 th ச சி.வு.சுக் கி சு	13. 1 1 HILE	ad when remoduling	DATE FICERS AND DIRECTORS IN 12
or registered agent, or both, in the State of Familiar with, and accept the obligations of SIGNATURE  Signar on better probabilistic of registers.  OFFICERS  IILE  P SEAY, TROY F.	Updadth Justain (€) AND DRECTORS ☐ DELETE	Tit Falpstone (Augmit segmat no noticen	ad when remoduling	DATE FICERS AND DIRECTORS IN 12
or registered agent, or both, in the State of F familiar with and accept the obligations of Signature is required to partial register of FICERS.  2. OFFICERS IILE P SEAY, TROY F. P.O. BOX 7153	gerector (was de (18) AND DRECTORS	13. 1 1 Hitt 1 2 NAME	ad when remoduling	DATE FICERS AND DIRECTORS IN 12 ☐ Change ☐ Addito
or registered agent, or both, in the State of Familiar with, and accept the obligations of Signature  2. OFFICERS  III.E  P  SEAY, TROY F.  SHEET ADDRESS  DIY-ST-ZIP  GAINESVILLE FL	Updadth Justain (€) AND DRECTORS ☐ DELETE	13. 1 Table 1 2 NAME 1 3 STAFFT ADDRESS	ad when remoduling	DATE FICERS AND DIRECTORS IN 12 ☐ Change ☐ Addito
or registered agent, or both, in the State of F familiar with, and accept the obligations of SIGNATURE  Signature, fact or probabilistic of Signature, fact or probabilistic of SIGNATURE  2. OFFICERS  III.E P SEAY, TROY F. III.E ST STATE STATE SEAY, TRINA M.	LINE AND DIRECTIORS  DELETE  (C2.5) NW S15+ DAYE  DELETE	13. 1 1 THE 1 2 NAME 13 STAFFT ADDRESS 14 CITY-ST-24P 2 1 THE 22 NAME	ad when remoduling	DATE FICERS AND DIRECTORS IN 12 ☐ Change ☐ Addito
or registered agent, or both, in the State of Familiar with, and accept the obligations of SIGNATURE  Signature field or published of registered in SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SEAY, TROY F.  P.O. BOX 7153  GAINESVILLE FL.  ST SEAY, TRINA M. P.O. BOX 7153  T.G. STREET ADDRESS  P.O. BOX 7153  T.G. ST SEAY, TRINA M. P.O. BOX 7153  T.G. ST SEAY, TRINA M. P.O. BOX 7153  T.G. ST SEAY, TRINA M. P.O. BOX 7153	Liperantion Colored (1925)  AND DIRECTIORS  DELETE  (2.5) NW 515+ Drive	13. 1 1 THE 1 2 NAME 1 3 STEEL ADDRESS 1 4 CHY-SL-2IP 2 1 THE 2 2 NAME	ad when remoduling	DATE FICERS AND DIRECTORS IN 12 ☐ Change ☐ Additor
or registered agent, or both, in the State of Flamiliar with, and accept the obligations of, Signature  2. OFFICERS  THE  P SEAY, TROY F.  P.O. BOX 7153  GAINESVILLE FL  ST  SEAY, TRINA M.  FREET ADDRESS  DITY-ST-ZIP  GAINESVILLE FL  GAINESVILLE FL  GAINESVILLE FL  GAINESVILLE FL  GAINESVILLE FL  GAINESVILLE FL	LINE COLO SIST Drive	13. 1 1 Title 1 2 NAME 1 3 STEEL LADDRESS 1 4 CHY-ST-2IP 2 1 TITLE 2 2 NAME 2 3 STREEL ADDRESS 2 4 CHY-ST-2IP	ad when remoduling	DAFE FICERS AND DIRECTORS IN 12 ☐ Change ☐ Addit.o
or registered agent, or both, in the State of Familiar with, and accept the obligations of Signature  Stranger to the form the familiar of registered productions of Signatures  2. OFFICERS  III.E P IAME SEAY, TROY F. P.O. BOX 7153 GAINESVILLE FL  STREEF ADDRESS DITY-ST-ZIP GAINESVILLE FL  STREEF ADDRESS DITY-ST-ZIP GAINESVILLE FL  ITLE  ITLE  TO DOTATION OF STATE OF THE STATE OF	LINE AND DIRECTIORS  DELETE  (C2.5) NW S15+ DAYE  DELETE	13. 1 1 Title 1 2 NAME 1 3 STEEL LADDRESS 1 4 CHY-ST-2IP 2 1 TITLE 2 2 NAME 2 3 STREEL ADDRESS 2 4 CHY-ST-2IP 3 1 TITLE	ad when remoduling	DATE FICERS AND DIRECTORS IN 12 Change Addito
or registered agent, or both, in the State of Familiar with, and accept the obligations of Signature  2. OFFICERS  III.E P SEAY, TROY F.  III.E STATE ADDRESS P.O. BOX 7153  CITY-ST-ZIP GAINESVILLE FL  STREET ADDRESS P.O. BOX 7153  SEAY, TRINA M.  STREET ADDRESS P.O. BOX 7153  GAINESVILLE FL  ITLE  STREET ADDRESS P.O. BOX 7153  GAINESVILLE FL  ITLE  AMME	LINE COLO SIST Drive	13. 1 1 Title 1 2 NAME 1 3 STEEL LADDRESS 1 4 CHY-ST-2IP 2 1 TITLE 2 2 NAME 2 3 STREEL ADDRESS 2 4 CHY-ST-2IP	ad when remoduling	DAFE FICERS AND DIRECTORS IN 12 ☐ Change ☐ Additor ☐ Change ☐ Additor
or registered agent, or both, in the State of Familiar with, and accept the obligations of Signature  2. OFFICERS  III.E P IMME SEAY, TROY F. ICHELLARDRESS P.O. BOX 7153  CITY-ST-ZIP GAINESVILLE FL STREET ADDRESS CITY-ST-ZIP GAINESVILLE FL STREET ADDRESS CITY-ST-ZIP GAINESVILLE FL  ITTLE  STREET ADDRESS CITY-ST-ZIP GAINESVILLE FL  ITTLE  MAME STREET ADDRESS  STREET ADDRESS  STREET ADDRESS	LINE COLO SIST Drive	13. 1 1 THE 1 2 NAME 1 3 STEEL LADDRESS 1 4 CHY-ST-2IP 2 1 THE 2 2 NAME 2 3 STREEL ADDRESS 2 4 CHY-ST-2IP 3 1 THE 3 2 NAME	ad when remoduling	FICERS AND DIRECTORS IN 12 Change Additor Change Additor
or registered agent, or both, in the State of Familiar with, and accept the obligations of Signature  2. OFFICERS  III.E P SEAY, TROY F.  III.E STATE OF BOX 7153  CITY-ST-ZIP GAINESVILLE FL  III.E STREET ADDRESS  CITY-ST-ZIP GAINESVILLE FL	LINE COLO SIST Drive	13. 1 1 THE 12 NAME 13 STEPL LADDRESS 14 CHY-SI-2IP 2 THIRE 22 NAME 23 STREELADDRESS 24 CHY-SI-2IP 3 THIRE 32 NAME 33 STREELADDRESS 33 STREELADDRESS	ad when remoduling	DATE FICERS AND DIRECTORS IN 12 Change Additor Change Additor Change Additor
or registered agent, or both, in the State of Farmiliar with, and accept the obligations of Signature.  Strait on the state or beligations of Signature.  Strait on the state or beligations of Signature.  Strait on the state of both, in the State of Farmiliar with, and accept the obligations of Signature.  Strait on the state of Both, in the State of Farmiliar with.  Strait on the state of Both, in the State of Farmiliar with.  SEAY, TROY F.  P.O. BOX 7153  SEAY, TRINA M.  P.O. BOX 7153  GAINESVILLE FL.  STREET ADDRESS  CITY-ST-ZIP	AND DIRECTORS  DELETE  25 NW SIST Drive  DELETE  25 NW SIST Drive	13. 1 1 THE 12 NAME 13 STEPL LADDRESS 14 CITY-ST-2IP 2 1 THE 22 NAME 23 STREELADDRESS 24 CITY-ST-2IP 3 1 THE 32 NAME 33 STREELADDRESS 34 CITY-ST-2IP 4 1 THE 42 NAME	ad when remoduling	FICERS AND DIRECTORS IN 12 Change Additor Change Additor
or registered agent, or both, in the State of Familiar with, and accept the obligations of Signature  Signature  Signature Signature partial factor of bothsets  12. OFFICERS  IILE P SEAY, TROY F. P.O. BOX 7153  OTFICE ST GAINESVILLE FL ST SEAY, TRINA M. P.O. BOX 7153  GAINESVILLE FL  STREET ADDRESS  CITY-ST-ZIP  GAINESVILLE FL  STREET ADDRESS  CITY-ST-ZIP  GAINESVILLE FL  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  NAME  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  NAME	AND DIRECTORS  DELETE  25 NW SIST Drive  DELETE  25 NW SIST Drive	13. 1 11:ILE 1 2 NAME 1 3 STEEL ADDRESS 1 4 CITY - ST - ZIP 2 1 TITE 2 2 NAME 2 3 STREEL ADDRESS 2 4 CITY - ST - ZIP 3 1 TITE 3 2 NAME 3 3 STREEL ADDRESS 3 4 CITY - ST - ZIP 4 1 TITE 4 2 NAME 4 3 STREEL ADDRESS 3 4 CITY - ST - ZIP	ad when remoduling	FICERS AND DIRECTORS IN 12 Change Additor Change Additor
or registered agent, or both, in the State of Familiar with, and accept the obligations of Signature  Signature  Signature  Signature  Signature  Signature  Signature  Signature  P SEAY, TROY F. P.O. BOX 7153  GAINESVILLE FL  SITE  SEAY, TRINA M. P.O. BOX 7153  GAINESVILLE FL  SITE  SIREET ADDRESS  GITY- ST- ZIP  GAINESVILLE FL  STREET ADDRESS  GITY- ST- ZIP  TITLE  NAME  SIREET ADDRESS  CITY- ST- ZIP  STREET ADDRESS  CITY- ST- ZIP  STREET ADDRESS  CITY- ST- ZIP	AND DIRECTORS  DELETE  25 NW SIST Drive  DELETE  DELETE	13. 1 1 THE 12 NAME 13 STEEL ADDRESS 14 CITY-ST-2IP 2 1 THE 22 NAME 23 STREEL ADDRESS 24 CITY-ST-2IP 3 1 THE 32 NAME 33 STREEL ADDRESS 34 CITY-ST-2IP 4 1 THE 42 NAME 43 STREEL ADDRESS 34 CITY-ST-2IP 4 1 THE 42 NAME 43 STREEL ADDRESS 44 CITY-ST-2IP	ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 12  Change Additor  Change Additor  Change Additor  Change Additor  Change Additor
or registered agent, or both, in the State of Familiar with, and accept the obligations of Signature.  Stranger by Stanger by State or problems of Signature.  Stranger by Stanger by Stang	AND DIRECTORS  DELETE  25 NW S1st Drive  DELETE  25 NW S1st Drive	13. 1 1 THE 12 NAME 13 STEEL ADDRESS 14 CITY-ST-2IP 2 1 THE 22 NAME 23 STREEL ADDRESS 24 CITY-ST-2IP 3 1 THE 32 NAME 33 STREEL ADDRESS 34 CITY-ST-2IP 4 1 THE 42 NAME 43 STREEL ADDRESS 44 CITY-ST-2IP 5 1 THE	ADDITIONS/CHANGES TO OFF	Change Addition    Change   Addition   Change   Addition
or registered agent, or both, in the State of Familiar with, and accept the obligations of Signature.  Stranger by Stanger by Stranger by Seary, TROY F.  SHEET ADDRESS DITY-ST-ZIP GAINESVILLE FL ST SEAY, TRINA M. P.O. BOX 7153 GAINESVILLE FL  STREET ADDRESS DITY-ST-ZIP GAINESVILLE FL  TITLE  ST SEAY, TRINA M. P.O. BOX 7153 GAINESVILLE FL  TITLE  NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	AND DIRECTORS  DELETE  25 NW SIST Drive  DELETE  DELETE	13. 1 1 THE 12 NAME 13 STEEL ADDRESS 14 CITY-ST-2IP 2 1 THE 22 NAME 23 STREEL ADDRESS 24 CITY-ST-2IP 3 1 THE 32 NAME 33 STREEL ADDRESS 34 CITY-ST-2IP 4 1 THE 42 NAME 43 STREEL ADDRESS 34 CITY-ST-2IP 4 1 THE 42 NAME 43 STREEL ADDRESS 44 CITY-ST-2IP	ADDITIONS/CHANGES TO OFF	Change Addition    Change   Addition   Change   Addition
or registered agent, or both, in the State of Familiar with, and accept the obligations of Signature.  Signature:  Seay, TROY F.  P.O. BOX 7153  GAINESVILLE FL  SIGNATURE:  ST  SEAY, TRINA M.  P.O. BOX 7153  GAINESVILLE FL  SIGNATURE:  SIGNATURE:  ST  SEAY, TRINA M.  P.O. BOX 7153  GAINESVILLE FL  SIGNATURE:  NAME  SIGNATURE:  ST  SEAY, TRINA M.  P.O. BOX 7153  GAINESVILLE FL  SIGNATURE:  NAME  SIGNATURE:  ST  SEAY, TRINA M.  P.O. BOX 7153  CITY-SI-ZIP  TITLE  NAME  SIGNATURE:  ST  SEAY, TRINA M.  P.O. BOX 7153  CITY-SI-ZIP  TITLE  NAME  SIGNATURE:  ST  SEAY, TRINA M.  P.O. BOX 7153  CITY-SI-ZIP  TITLE  NAME  SIGNATURE:  ST  SEAY, TRINA M.  P.O. BOX 7153  CITY-SI-ZIP  TITLE  NAME  SIGNATURE:  ST  SEAY, TRINA M.  P.O. BOX 7153  TOX  SEAY  SEAY  TOX  SEAY  TOX  SEAY  TOX  SEAY  TO	AND DIRECTORS  DELETE  25 NW SIST Drive  DELETE  DELETE	13. 1 1 THE 12 NAME 13 STEEL ADDRESS 14 CITY-ST-2IP 2 1 THE 22 NAME 23 STREEL ADDRESS 24 CITY-ST-2IP 3 1 THE 32 NAME 33 STREEL ADDRESS 34 CITY-ST-2IP 4 1 THE 42 NAME 43 STREEL ADDRESS 34 CITY-ST-2IP 4 1 THE 42 NAME 43 STREEL ADDRESS 44 CITY-ST-7IP 5 1 THE 52 NAME	ADDITIONS/CHANGES TO OFF	Change Addition    Change   Addition   Change   Addition   Change   Addition   Change   Addition
or registered agent, or both, in the State of Familiar with, and accept the obligations of Signature  Signature  Signature  Signature Signature between 5 registers.  Signature Signature between 5 registers.  Signature Signature between 5 registers.  Signature Signature problems 5 registers.  SEAY, TROY F.  P.O. BOX 7153  GAINESVILLE FL  STREET ADDRESS  CITY-ST-ZIP  GAINESVILLE FL  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	AND DIRECTORS  DELETE  25 NW SIST Drive  DELETE  DELETE	13. 1 1 11/16 1 2 NAME 1 3 STEFF I ADDRESS 1 4 CITY - ST - 2/P 2 1 TITE 2 2 NAME 2 3 STREET ADDRESS 2 4 CITY - ST - 2/P 3 1 TITLE 3 2 NAME 3 3 STREET ADDRESS 3 4 CITY - ST - 2/P 4 1 TITLE 4 2 NAME 4 3 STREET ADDRESS 4 4 CITY - ST - 2/P 5 1 TITLE 5 2 NAME 5 3 STREET ADDRESS	ADDITIONS/CHANGES TO OFF	Change Addition    Change   Addition   Change   Addition   Change   Addition   Change   Addition
or registered agent, or both, in the State of Familiar with, and accept the obligations of SIGNATURE  Signar an light or problem to be forecast of the SIGNATURE  Signar an light or problem to be forecast of the SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SEAY, TROY F.  P.O. BOX 7153  GAINESVILLE FL  STREET ADDRESS  GAINESVILLE FL  GAINESVILLE FL  TITLE  NAME  STREET ADDRESS  GAINESVILLE FL  STREET ADDRESS  STREET ADDRESS	AND DIRECTORS  DELETE  2.5 No. Stat Drive  DELETE  DELETE	13. 1 11:ILE 12 NAME 13 STEFF I ADDRESS 14 CITY-ST-2IP 2 1 TITE 22 NAME 23 STREET ADDRESS 24 CITY-ST-2IP 3 1 TITE 32 NAME 33 STREET ADDRESS 34 CITY-ST-2IP 4 1 TITE 42 NAME 43 STREET ADDRESS 44 CITY-ST-2IP 5 1 TITE 52 NAME 53 STREET ADDRESS 54 CITY-ST-7IP 5 1 TITE 57 NAME 53 STREET ADDRESS 54 CITY-ST-7IP	ADDITIONS/CHANGES TO OFF	Change Addition    Change   Addition   Change   Addition   Change   Addition   Change   Addition
SIGNATURE  Styler on Type Control of Programme L.  12. OFFICERS  TITLE P  NAME SEAY, TROY F.  P.O. BOX 7153 To  GAINESVILLE FL  ST  NAME SEAY, TRINA M.  STREET ADDRESS  CITY - ST - ZIP  TITLE  NAME  STREET ADDRESS  CITY - ST - ZIP  TITLE  NAME  STREET ADDRESS  CITY - ST - ZIP  TITLE  NAME  STREET ADDRESS  CITY - ST - ZIP  TITLE  NAME  STREET ADDRESS  CITY - ST - ZIP  TITLE  NAME  STREET ADDRESS  CITY - ST - ZIP  TITLE  NAME  STREET ADDRESS  CITY - ST - ZIP  TITLE  NAME  STREET ADDRESS  CITY - ST - ZIP  TITLE  NAME  STREET ADDRESS  CITY - ST - ZIP  TITLE  NAME  STREET ADDRESS  CITY - ST - ZIP  TITLE	AND DIRECTORS  DELETE  2.5 No. Stat Drive  DELETE  DELETE	13. 1 11:ILE 1 2 NAME 1 3 STEFF LADDRESS 1 4 CITY - ST - 2IP 2 1 TITE 2 2 NAME 2 3 STREET ADDRESS 2 4 CITY - ST - 2IP 3 1 TITLE 3 2 NAME 3 3 STREET ADDRESS 3 4 CITY - ST - 2IP 4 1 TITLE 4 2 NAME 4 3 STREET ADDRESS 3 4 CITY - ST - 2IP 5 1 TITLE 5 2 NAME 5 3 STREET ADDRESS 5 4 CITY - ST - 7IP 5 1 TITLE 5 2 NAME 5 3 STREET ADDRESS 5 4 CITY - ST - 7IP 6 1 TITLE	900018 -06/17/9601 ***200.00	Change Addition    Change   Addition

**SIGNATURE:** 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OPFICER OR DIRECTOR