

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000088178

FILED
Apr 24, 2012
Secretary of State

Entity Name: SEAVIN, INC.

Current Principal Place of Business:

19239 U.S. HIGHWAY 27 NORTH
CLERMONT, FL 34715

New Principal Place of Business:

Current Mailing Address:

19239 U.S. HIGHWAY 27 NORTH
CLERMONT, FL 34715

New Mailing Address:

FEI Number: 59-3284508

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COX, C. GARY
19239 U.S. HIGHWAY 27 NORTH
CLERMONT, FL 34715 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

OFFICERS AND DIRECTORS:

Title: C/D
Name: COX, C. GARY
Address: 7485 HEARTLAND CIRCLE
City-St-Zip: TALLAHASSEE, FL 32308

Title: S/D
Name: COX, CAROLE C
Address: 7485 HEARTLAND CIRCLE
City-St-Zip: TALLAHASSEE, FL 32308

Title: D
Name: BRODIE, EDMUND M
Address: 2474 NW 77TH BLVD., APARTMENT 4005
City-St-Zip: GAINESVILLE, FL 32606

Title: P/D
Name: COX, CHARLES G II
Address: 3689 LONE WOLF TRAIL
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: T
Name: ENIX, DAWN M
Address: 11313 DAVISON LANE
City-St-Zip: TAVARES, FL 32778

Title: V
Name: BURGESS, JEANNE M
Address: 11330 SOONER DRIVE
City-St-Zip: CLERMONT, FL 34711

I hereby 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 all other like empowered.

SIGNATURE: MANDI ENIX

T

04/24/2012

Electronic Signature of Signing Officer or Director

Date