

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000065076

Entity Name: SEIBEL CORPORATION

FILED
Mar 26, 2007
Secretary of State

Current Principal Place of Business:

C/O RICCIANI, MATHIS & JESSEN CPAS
6371-4 PRESIDENTIAL CT
FORT MYERS, FL 33919

New Principal Place of Business:

C/O MATHIS, JESSEN & COMPANY, CPAS
6371-4 PRESIDENTIAL CT
FORT MYERS, FL 33919

Current Mailing Address:

C/O RICCIANI, MATHIS & JESSEN CPAS
6371-4 PRESIDENTIAL CT
FORT MYERS, FL 33919

New Mailing Address:

C/O MATHIS, JESSEN & COMPANY, CPAS
6371-4 PRESIDENTIAL CT
FORT MYERS, FL 33919

FEI Number: 65-0656735

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JESSEN, ANDREW G
6371-4 PRESIDENTIAL CT
FORT MYERS, FL 33919 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: D () Delete
Name: SEIBEL, UTE
Address: ALTER POSTWEG 63
City-St-Zip: DORSTEN GERMANY, FL D-462

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: UTE SEIBEL

D

03/26/2007

Electronic Signature of Signing Officer or Director

_____ Date