

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000005851

FILED  
Apr 29, 2007  
Secretary of State

Entity Name: SEA COW, INC.

**Current Principal Place of Business:**

830 SOUTH LAKE SHORE WAY  
LAKE ALFRED, FL 33850

**New Principal Place of Business:**

**Current Mailing Address:**

830 SOUTH LAKE SHORE WAY  
LAKE ALFRED, FL 33850

**New Mailing Address:**

FEI Number: 59-3365742      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BENNETT, BARRY W  
60 SECOND STREET SE  
WINTER HAVEN, FL 33880      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      (X) Delete  
Name: HALLMARK, STACEY M  
Address: 140 LOWELL ROAD SE  
City-St-Zip: WINTER HAVEN, FL 33884

Title: D      ( ) Delete  
Name: QUINN, EVAN B  
Address: 420 WHITMAN ROAD  
City-St-Zip: WINTER HAVEN, FL 33884

Title: D      ( ) Delete  
Name: QUINN, COURTNEY R  
Address: 420 WHITMAN ROAD  
City-St-Zip: WINTER HAVEN, FL 33884

Title: PD      ( ) Delete  
Name: QUINN, TERENCE B  
Address: 830 SOUTH LAKE SHORE WAY  
City-St-Zip: LAKE ALFRED, FL 33850

**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:

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: TERENCE B QUINN

PD

04/29/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date