

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000005851

Entity Name: SEA COW, INC.

FILED
Apr 08, 2009
Secretary of State

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
106 AVENUE F, S.W
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 () 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

Title: () Delete
Name:
Address:
City-St-Zip:

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: D () Change (X) Addition
Name: QUINN, ELIZABETH
Address: SOUTH LAKE SHORE WAY
City-St-Zip: LAKE ALFRED, FL 33850

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

04/08/2009

Electronic Signature of Signing Officer or Director

Date