

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000024829

Entity Name: SEVEN DWARFS, INC.

FILED  
Jan 06, 2012  
Secretary of State

**Current Principal Place of Business:**

130 W SHIPWRECK ROAD  
SANTA ROSA BEACH, FL 32459 US

**New Principal Place of Business:**

**Current Mailing Address:**

130 WEST SHIPWRECK ROAD  
SANTA ROSA BEACH, FL 32459 US

**New Mailing Address:**

FEI Number: 59-3371925

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SEYMOUR, EDWARD H  
35000 EMERALD COAST PKWY  
DESTIN, FL 32541 US

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

SEYMOUR, EDWARD H  
130 WEST SHIPWRECK ROAD  
SANTA ROSA BEACH, FL 32459 US

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

01/06/2012

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: OLIN, JAMES  
Address: 130 WEST SHIPWRECK ROAD  
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: STD  
Name: SEYMOUR, EDWARD H  
Address: 130 WEST SHIPWRECK ROAD  
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: D  
Name: CRAUL, BRUCE  
Address: 130 WEST SHIPWRECK ROAD  
City-St-Zip: SANTA ROSA BEACH, FL 32459

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: JAMES OLIN

Electronic Signature of Signing Officer or Director

PD

01/06/2012

Date