2008 FOR PROFIT CORPORATION

FILED Apr 21, 2008 08:00 A Secretary of State **ANNUAL REPORT DOCUMENT # P96000070508** 1. Entity Name SEVÉN NORTH, INC. Principal Place of Business Mailing Address 1250 - 9TH STREET NORTH 1250 - 9TH STREET NORTH ST. PETERSBURG, FL 33705 ST. PETERSBURG, FL 33705 CR2E034 (11/05) 02202008 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3414707 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LOVELACE, WILLIAM K. DO NOT WRITE 2310 WEST BAY DRIVE LARGO, FL 33770 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature regured when renatating) 9. Election Campaign Financing FILE NOW!!! FEE 18 \$150.00 After May 1, 2008 Fee will be \$550.00 \$5.00 May Be U000000912329 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE COURNOYER, JAMES F NAME 1250 9TH STREET NORTH STREET ADDRESS CITY-ST-ZIP SAINT PETERSBURG, FL 33705 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an appearant with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP