

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000101061

Entity Name: SEVEN NATIONS, INC.

FILED  
Sep 14, 2004  
Secretary of State

**Current Principal Place of Business:**

6238 BLUE CLAY CT.  
ORLANDO, FL 32819

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 770926  
ORLANDO, FL 328770926

**New Mailing Address:**

6238 BLUE CLAY CT  
ORLANDO, FL 32819

FEI Number: 59-3449288

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MCLEOD, KIRK A  
6238 BLUE CLAY CT.  
ORLANDO, FL 32819 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: MCLEOD, KIRK  
Address: 6238 BLUE CLAY CT.  
City-St-Zip: ORLANDO, FL 32819

Title: D ( ) Delete  
Name: STRUBLE, JAMES  
Address: 2587 SIGMA CT.  
City-St-Zip: ORANGE PARK, FL 32073

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 for the exemption stated in Section 119.07(3)(i), 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: KIRK MCLEOD

PD

09/14/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date