

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000096797

Entity Name: SEAVEST CORPORATION

FILED  
Apr 27, 2007  
Secretary of State

## Current Principal Place of Business:

100 SHORELINE DR  
LAKE PLACID, FL 33852

## New Principal Place of Business:

## Current Mailing Address:

100 SHORELINE DR  
LAKE PLACID, FL 33852

## New Mailing Address:

FEI Number: 65-0795368

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RHOADES, CLIFFORD R  
227 NORTH RIDGEWOOD DRIVE  
SEBRING, FL 33870 US

## Name and Address of New Registered Agent:

RHOADES, CLIFFORD R  
2141 NE LAKEVIEW DRIVE  
SEBRING, FL 33870 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: CLIFFORD R. RHOADES

04/27/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VP ( ) Delete  
Name: COZIER, R A  
Address: 100 SHORELINE DR  
City-St-Zip: LAKE PLACID, FL 33852

Title: P ( ) Delete  
Name: RHOADES, CLIFFORD R  
Address: 227 N RIDGEWOOD DR  
City-St-Zip: SEBRING, FL 33852

Title: ST ( ) Delete  
Name: LOVELETTE, TERESA A  
Address: 100 SHORELINE DR  
City-St-Zip: LAKE PLACID, FL 33852

## 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:

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: R. A. COZIER

VP

04/27/2007

Electronic Signature of Signing Officer or Director

Date