

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000062609

FILED
Feb 15, 2007
Secretary of State

Entity Name: SEABORN CONSTRUCTION, INC.

Current Principal Place of Business:

6656 COLUMBIA PARK DR
STE 6
JACKSONVILLE, FL 32258

New Principal Place of Business:

Current Mailing Address:

6656 COLUMBIA PARK DR
STE 6
JACKSONVILLE, FL 32258

New Mailing Address:

FEI Number: 59-3523591

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SNIDER, S. PIERCE
12656 FILLY COURT
JACKSONVILLE, FL 32223 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: CEO () Delete
Name: SNIDER, S. PIERCE
Address: 12656 FILLY COURT
City-St-Zip: JACKSONVILLE, FL 32223

Title: P () Delete
Name: SNIDER, MICHAEL P
Address: 525 GRAND PARKE DRIVE
City-St-Zip: JACKSONVILLE, FL 32259

Title: ST () Delete
Name: MC CALL, SHERRIE S
Address: 14470 WOODFIELD CIR S
City-St-Zip: JACKSONVILLE, FL 32258

Title: VP (X) Delete
Name: CREGG, GORDON J
Address: 11123 SCOTT MILL ROAD
City-St-Zip: JACKSONVILLE, FL 32223

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: () 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 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: SHERRIE S. MCCALL

ST

02/15/2007

Electronic Signature of Signing Officer or Director

Date