

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000100429

Entity Name: SEAVENTURES USA, INC.

FILED  
Apr 20, 2009  
Secretary of State

## Current Principal Place of Business:

635 WAKULLA ARRAN ROAD  
CRAWFORDVILLE, FL 32327

## New Principal Place of Business:

## Current Mailing Address:

P O BOX 1420  
CRAWFORDVILLE, FL 32326

## New Mailing Address:

FEI Number: 59-3256203

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SHEPPARD, MILDRED  
225 REHWINKEL ROAD  
CRAWFORDVILLE, FL 32327 US

## Name and Address of New Registered Agent:

SHEPPARD, MILDRED C  
225 REHWINKEL ROAD  
CRAWFORDVILLE, FL 32327 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: MILDRED C. SHEPPARD

04/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PT ( ) Delete  
Name: SHEPPARD, MILDRED  
Address: 225 REHWINKEL ROAD  
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: V ( ) Delete  
Name: SHEPPARD, NORMAN D  
Address: 225 REHWINKEL ROAD  
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: S ( ) Delete  
Name: SHEPPARD, JONATHAN  
Address: 60 DAN'S DRIVE  
City-St-Zip: CRAWFORDVILLE, FL 32327

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: SHEPPARD, JONATHAN  
Address: 21 CALVARY COURT  
City-St-Zip: CRAWFORDVILLE, FL 32327

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: MILDRED C. SHEPPARD

PRES

04/20/2009

Electronic Signature of Signing Officer or Director

Date