

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000009413

FILED  
May 01, 2008  
Secretary of State

Entity Name: THE SEASHELL CORPORATION

**Current Principal Place of Business:**

149 SE LOCHLYAN TERR  
LAKE CITY, FL 32025

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 2137  
LAKE CITY, FL 32056

**New Mailing Address:**

FEI Number: 59-3556221

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TURBEVILLE, ANGELA M  
149 SE LOCHLYAN TERR  
LAKE CITY, FL 32025 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: VPS ( ) Delete  
Name: TURBERVILLE, ANGELA M  
Address: 174 NW VENICE GLEN  
City-St-Zip: LAKE CITY, FL 32055

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

Title: VPS (X) Change ( ) Addition  
Name: TURBEVILLE, ANGELA M  
Address: 174 NW VENICE GLEN  
City-St-Zip: LAKE CITY, FL 32055

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: ANGELA TURBEVILLE

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05/01/2008

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date