

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000041065

Entity Name: SEAGATE INVESTMENTS, INC.

FILED
Apr 30, 2004
Secretary of State

Current Principal Place of Business:

185 CYPRESS POINT PARKWAY,STE.7
PALM COAST, FL 32164

New Principal Place of Business:

Current Mailing Address:

185 CYPRESS POINT PARKWAY,STE.7
PALM COAST, FL 32164

New Mailing Address:

FEI Number: 59-3643353

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GAZZOLI, LAURA
185 CYPRESS POINT PARKWAY,STE.7
PALM COAST, FL 32164

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: DT () Delete
Name: GAZZOLI, JOHN R
Address: 185 CYPRESS POINT PARKWAY,STE.7
City-St-Zip: PALM COAST, FL 32164

Title: D () Delete
Name: GAZZOLI, ROBERT
Address: 185 CYPRESS POINT PARKWAY,STE.7
City-St-Zip: PALM COAST, FL 32164

Title: D () Delete
Name: GAZZOLI, BRIAN
Address: 185 CYPRESS POINT PARKWAY,STE.7
City-St-Zip: PALM COAST, FL 32164

Title: D (X) Delete
Name: GAZZOLI, LAURA
Address: 185 CYPRESS POINT PARKWAY,STE.7
City-St-Zip: PALM COAST, FL 32164

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GAZZOLI, JOHN R
Address: 185 CYPRESS POINT PARKWAY,STE.7
City-St-Zip: PALM COAST, FL 32164

Title: VT (X) Change () Addition
Name: GAZZOLI, ROBERT
Address: 185 CYPRESS POINT PARKWAY,STE.7
City-St-Zip: PALM COAST, FL 32164

Title: S (X) Change () Addition
Name: GAZZOLI, LAURA
Address: 185 CYPRESS POINT PARKWAY,STE.7
City-St-Zip: PALM COAST, FL 32164

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: LAURA GAZZOLI

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04/30/2004

Electronic Signature of Signing Officer or Director

Date