

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S28317

FILED
Feb 13, 2009
Secretary of State

Entity Name: SEAHORSE REALTY, INC.

Current Principal Place of Business:

15 N. EGLIN PARKWAY
FORT WALTON BEACH, FL 32548 US

New Principal Place of Business:

Current Mailing Address:

29 N. EGLIN PARKWAY
FORT WALTON BEACH, FL 32548 US

New Mailing Address:

PO DRAWER 1327
FORT WALTON BEACH, FL 32549 US

FEI Number: 59-3049763

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEASLEY, J. LARRY
29 EGLIN PARKWAY
FORT WALTON BEACH, FL 32548 US

Name and Address of New Registered Agent:

BEASLEY, J. L SR
29 EGLIN PARKWAY
FORT WALTON BEACH, FL 32548 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: J. LARRY BEASLEY, SR

02/13/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: SMITH, GREGORY M.,
Address: 15 N. EGLIN PARKWAY
City-St-Zip: FT. WALTON BEACH, FL

Title: PD () Delete
Name: BEASLEY, LARRY J SR
Address: 29 N. EGLIN PARKWAY
City-St-Zip: FT. WALTON BCH, FL

Title: D () Delete
Name: TRINGAS, JOHN J
Address: 29 N. EGLIN PARKWAY
City-St-Zip: FT. WALTON BCH, FL

Title: D () Delete
Name: TRINGAS, LARK
Address: 29 N. EGLIN PARKWAY
City-St-Zip: FT. WALTON BCH, FL

Title: D () Delete
Name: TRINGAS, ALEX J
Address: 29 N. EGLIN PARKWAY
City-St-Zip: FT. WALTON BCH, FL

Title: D () Delete
Name: TRINGAS, KATRINA
Address: 29 N. EGLIN PKWY
City-St-Zip: FT. WALTON BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V (X) Change () Addition
Name: SMITH, GREGORY M
Address: 15 N. EGLIN PARKWAY
City-St-Zip: FT. WALTON BEACH, FL

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:

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: J. LARRY BEASLEY, SR

PD

02/13/2009

Electronic Signature of Signing Officer or Director

Date