

ORIGINAL

D512 dated 12/16/04  
-PM per VM

CUTFF 1066  
CK \$ 100.00  
12-16-04  
RT

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DEC 16 PM 2:40

1. Name of company or name of individual (not fictitious name or d/b/a):

SEASHORE SOFTWARE, INC.

COMMISSION CLERK

2. Name under which applicant will do business (fictitious name, etc.):

SEASLOER SERVICES, INC

3. Official mailing address:

Street: 11082 FieldFair Dr.

P.O. Box:

City: Naples

State: FL

Zip: 34119-8924

COMMISSION CLERK

DEC 16 PM 3:58

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4. Florida address:

Street: 11082 FieldFair Dr.

P.O. Box:

City: Naples

State: FL

Zip: 34119-8924

5. Structure of organization:

( ) Individual

(X) Corporation

( ) General Partnership

( ) Limited Partnership

( ) Other:

CMP \_\_\_\_\_

COM \_\_\_\_\_

CTR \_\_\_\_\_

ECR \_\_\_\_\_

GCL \_\_\_\_\_

OPC \_\_\_\_\_

MMS \_\_\_\_\_

RCA \_\_\_\_\_

SCR \_\_\_\_\_

SEC   1  

OTH \_\_\_\_\_

Form PSC/CMU-32 (02/99)

Required by Commission Rule 25A-24.910, filing and forwarded to Fiscal for deposit. Fiscal to forward deposit information to Records.

Initials of person who forwarded check:

Soc

DOCUMENT NUMBER - DATE

13225 DEC 16 04

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