


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 15, 2004 8:00 am
Secretary of State

03-15-2004 90063 022 ****61.25

DOCUMENT # 710479					
1. Entity Name SEA MONARCH CONDOMINIUM, INC.					
Principal Place of Business 111 N POMPANO BEACH BLVD POMPANO BEACH FL 33062			Mailing Address 111 N POMPANO BEACH BLVD POMPANO BEACH FL 33062		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-1308234	
Zip		Country		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent POLIAKOFF, GARY 3111 STIRLIN ROAD FT. LAUDERDALE FL 33312-3525			7. Name and Address of New Registered Agent		
Name			Name		
Street Address (P.O. Box Number is Not Acceptable)			Street Address (P.O. Box Number is Not Acceptable)		
City			City		
FL			Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW: FEE IS \$61.25 Due By May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CERASANI, JOHN		NAME		
STREET ADDRESS	111 N POMPANO BCH BLVD #1511		STREET ADDRESS		
CITY-ST-ZIP	POMPANO BEACH FL 33062		CITY-ST-ZIP		
TITLE	VPD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLATT, WILLIAM		NAME		
STREET ADDRESS	111 N POMPANO BCH BLVD #1912		STREET ADDRESS		
CITY-ST-ZIP	POMPANO BEACH FL 33062		CITY-ST-ZIP		
TITLE	SD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GOLDFARB, DAVID		NAME		
STREET ADDRESS	111 N POMPANO BCH BLVD #314		STREET ADDRESS		
CITY-ST-ZIP	POMPANO BEACH FL 33062		CITY-ST-ZIP		
TITLE	TD	<input type="checkbox"/> Delete	TITLE	TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WHITTEN, WARD		NAME	WHITTEN, WARD	
STREET ADDRESS	111 N POMPANO BEACH BLVD #1906		STREET ADDRESS	111 N. POMPANO BEACH BLVD, #1906	
CITY-ST-ZIP	POMPANO BCH FL 33062		CITY-ST-ZIP	POMPANO BEACH, FL 33062	
TITLE	TD	<input checked="" type="checkbox"/> Delete	TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KRINSKY, JAMES		NAME	CAPORELLA, NICK A. JR.	
STREET ADDRESS	111 N. POMPANO BEACH BLVD #1212		STREET ADDRESS	111 N. POMPANO BEACH BLVD #1204	
CITY-ST-ZIP	POMPANO BEACH FL 33062		CITY-ST-ZIP	POMPANO BEACH, FL 33062	
TITLE	TD	<input type="checkbox"/> Delete	TITLE	TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LOPSON, LAURA LEE		NAME	LARSEN, LAURALEE	
STREET ADDRESS	111 N POMPANO BCH BLVD #704		STREET ADDRESS	111 N. POMPANO BEACH BLVD #1014	
CITY-ST-ZIP	POMPANO BEACH FL 33062		CITY-ST-ZIP	POMPANO BEACH, FL 33062	
12. I hereby certify that the information supplied with this filing does not qualify 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 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>John Cerasani</u>		Date: <u>3/12/04</u>		Daytime Phone #: <u>954-781-0350</u>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					