2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#713743

FILED Apr 02, 2009 Secretary of State

Entity Name: SEA BREEZE APARTMENTS CONDOMINIUM, INC.

Current Principal Place of Business: New Principal Place of Business:

247 NORTH COLLIER BLVD., SUITE 202 20 MARCO LAKE DR #9 MARCO ISLAND, FL 34145 MARCO ISLAND, FL 34145

Current Mailing Address: New Mailing Address:

PO BOX 1693

MARCO ISLAND, FL 34146

FEI Number: 59-1228366 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GREUSEL, JAMIE B 1104 NORTH COLLIER BOULEVARD MARCO ISLAND, FL 34145

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

METHOT, JOSEPH METHOT, JOSEPH Name: Name: 13 KENNETH ST Address: 13 KENNETH ST Address: City-St-Zip: PORTLAND, ME 04103 City-St-Zip: PORTLAND, ME 04103

Title: VD Title: () Delete (X) Change () Addition

NELLIS, JOHN Name: NELLIS, JOHN Name:

Address: 240 N. COLLIER BLVD D1 Address: 240 N. COLLIER BLVD D1 City-St-Zip: MARCO ISLAND, FL 34145 City-St-Zip: MARCO ISLAND, FL 34145

Title: () Delete Title: (X) Change () Addition

SAFFIOT, THOMAS SAFFIOT, THOMAS Name: Name: 236 NEWARD RD S. Address: Address: 236 NEWARD RD S City-St-Zip: BARNEGAT, NJ 08005 City-St-Zip: BARNEGAT, NJ 08005

Title: () Delete Title: (X) Change () Addition

SCHLOFF, EUGENE ECCLES, DAVID Name: Name: 5384 DIERKS DR. Address: Address: 25 HURON AVE

City-St-Zip: ROCKFORD, IL 61108 City-St-Zip: LAKE HIAWATHA, NJ 07034

Title: () Delete Title: (X) Change () Addition

CARTER, THOMAS CARTER, THOMAS Name: Name: 25846 W. HIGHWAY 134 25846 W. HIGHWAY 134 Address: Address: City-St-Zip: INGLESIDE, IL 60041 City-St-Zip: INGLESIDE, IL 60041

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN NELLIS Ρ 04/02/2009