2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#725816

Entity Name: S.C. CONDOMINIUM, INC.

FILED Jul 06, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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4445 SOUTH ATLANTIC AVENUE PONCE INLET, FL 32127

Current Mailing Address: New Mailing Address:

4445 SOUTH ATLANTIC AVENUE PONCE INLET, FL 32127

FEI Number: 59-1564467 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:

VAN AKIN, EDWARD H
1615 ANTIGUA DR
ORLANDO, FL 32806

MARKETTE, FRAN
4445 SOUTH ATLANTIC AVE.
706
PONCE INLET, FL 32127

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: FRAN MARKETTE 07/06/2004

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition VAN AKIN, EDWARD MARKETTE, EVAN Name: Name: 1615 ANTIGUA DR Address: 4445 S. ATLANTIC AVE Address: City-St-Zip: ORLANDO, FL 32806 City-St-Zip: PONCE INLET, FL 32127 Title: () Delete Title: (X) Change () Addition Name: MARKETTE, EVAN Name: VANAKIN, EDWARD Address: 4445 S. ATLANTIC AVE Address: 4435 SOUTH ATLANTIC AVE. City-St-Zip: PONCE INLET, FL 32127 City-St-Zip: PONCE INLET, FL 32127 Title: () Delete Title: () Change () Addition

Name: HAGEY, SUZY Name:
Address: 4445 S. ATLANTIC AVE Address:

Address: 4445 S. ATLANTIC AVE Address: City-St-Zip: PONCE INLET, FL 32127 City-St-Zip:

Title: DT () Delete Title: () Change () Addition

 Name:
 BABCOCK, GEORGE
 Name:

 Address:
 324 OAK ESTATES DR
 Address:

 City-St-Zip:
 ORLANDO, FL 32806
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 GEEGHON, JACK
 Name:

 Address:
 PO BOX 146
 Address:

 City-St-Zip:
 MARBLE HILL, GA 30148
 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FRAN MARKETTE PD 07/06/2004