2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jan 31, 2007 8:00 am Secretary of State

DOCUMENT # 741183 1. Entity Name SEA PALMS CONDOMINIUM ASSOCIATION, INC.				01-	-31-2007 9	90045 033 ****61.	25	
3200 N. A1A 32		Mailing Address 3200 N. A1A FT. PIERCE, FL 34949	3200 N. A1A		40007492			
2. Principal P	lace of Business - No P.O. Box #	3. Mailing Address	ailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01092007 _{Ct}	ng-NP	CR2E037 (12/06)		
City & State		City & State		4. FEI Number 59-187026	9		oplied For	
Zip	Country	Zip	Country	5. Certificate of Sta	atus Desired	\$8.75 Add	ditional	
	6. Name and Address of Current	Registered Agent		7. Name and Add	ress of New	Registered Agent		
ROSS, DEBORAH L ESQ. C/O ROSS ÉARLE & BONAN, PC 759 S FEDERAL HIGHWAY SUITE 212 STUART, FL 34994			Street Addres	Street Address (P.O. Box Number is Not Acceptable)				
	named entity submits this statement folions of registered agent.	r the purpose of changing its i	registered office or regi	stered agent, or both, in	the State of F		and accept	
SIGNATURE .	Signature, typed or printed name of registered agent	and title if applicable. (NOTE	: Registered Agent signature req	uirēd when reinstating)		DATE		
	Filing Fee is \$61.25 Due by May 1, 2007	npaign Financing ontribution.	\$5.00 May Be Added to Fees					
10.	OFFICERS AND DII	RECTORS	11.	ADDITIONS/CHANG	ES TO OFFIC	ERS AND DIRECTORS IN	110	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD THERIAULT, LEONARD 3200 N A1A-#103 FT. PIERCE, FL 34949	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PALATUCCI 1200 N. AIT FT PIERCE	1 # 70	1) □ Change 1)2 1,4949	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD CLEMENTS, CAROL 3200 N A1A #1205 FT. PIERCE, FL 34949	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD GRANGE, JOHN T 3200 N A1A #1110 FORT PIERCE, FL 34949	☐ Delate	TITLE NAME STREET ADDRESS CITY-ST-ZIP	RANGE, TER	ry	Z Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WRENCH, DANIEL 3200 N A1A 106 FORT PIERCE, FL 34949	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CARLSON, LOUISE 3200 N A1A.#405 FORT PIERCE, FL 34949	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	loxson, Lou	เเระ	Change	☐ Addition	
TITLE NAME STREET ADDRESS	D STEVENS, ROBERT 3200 N A1A-#802 FT PIERCE, FL 34949	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

772-461-3100 Daytime Phone #

40007492

ROSENBERG, WILLIAM
3200 N. AIA # 204
Ft. PIELCE, FL 34949