2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2009
Secretary of State

DOCUMENT# 741183

Entity Name: SEA PALMS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3200 NORTH A1A
FT. PIERCE, FL 34949

New Principal Place of Business:

Current Mailing Address:

3200 NORTH A1A
FT. PIERCE, FL 34949

New Mailing Address:

FEI Number: 59-1870269 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

YATES & MANCINI, LLC
311 SOUTH SECOND STREET
FORT PIERCE, FL 34950 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	TD	( ) Delete
Name:	PALATUCCI, LYNN	
Address:	3200 N A1A # 702	
City-St-Zip:	FT. PIERCE, FL 34949	
Title:	PD	( ) Delete
Name:	CLEMENTS, CAROL	
Address:	3200 N A1A #1205	
City-St-Zip:	FT. PIERCE, FL 34949	
Title:	VPD	( ) Delete
Name:	GRANGE, TERRY	
Address:	3200 N A1A #1110	
City-St-Zip:	FORT PIERCE, FL 34949	
Title:	D	( ) Delete
Name:	WRENCH, DANIEL	
Address:	3200 N A1A 106	
City-St-Zip:	FORT PIERCE, FL 34949	
Title:	SD	( ) Delete
Name:	COXSON, LOUISE	
Address:	3200 N A1A-#405	
City-St-Zip:	FORT PIERCE, FL 34949	
Title:	D	( ) Delete
Name:	STEVENS, ROBERT	
Address:	3200 N A1A-#802	
City-St-Zip:	FT PIERCE, FL 34949	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	D	(X) Change ( ) Addition
Name:	PALATUCCI, LYNN	
Address:	3200 N A1A # 702	
City-St-Zip:	FT. PIERCE, FL 34949	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	TD	(X) Change ( ) Addition
Name:	COXSON, LOUISE	
Address:	3200 N A1A-#405	
City-St-Zip:	FORT PIERCE, FL 34949	
Title:	SD	(X) Change ( ) Addition
Name:	STEVENS, ROBERT	
Address:	3200 N A1A-#802	
City-St-Zip:	FT PIERCE, FL 34949	

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: CAROL CLEMENTS PRES 01/14/2009

Electronic Signature of Signing Officer or Director — Date