2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 02, 2003 8:00 am
Secretary of State
04-02-2003 90119 015 ****61.25

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DOCUMENT # 760667

1. Entity Name
SEA HAVEN CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
6100 AIA SOUTH ST AUGUSTINE FL 32084	6100 AIA SOUTH ST AUGUSTINE FL 32084

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
6100 A1A South	6100 A1A South
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: St. Augustine FL	City & State: St. Augustine FL
Zip: 32080 Country	Zip: 32080 Country

4. FEI Number 59-2215816 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
WARD, SANDI 6100 A1A SOUTH ST AUGUSTINE FL 32084	Name Street Address (P.O. Box Number is Not Acceptable) 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD WARD, SANDI 6100 A1A S ST AUGUSTINE FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD TENORE, JACOB 3532 KINGS RD S. SAINT AUGUSTINE FL 32086-5079	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD SANTOS, SAMSON 5418 BURDETTE ROAD JACKSONVILLE FL 32211	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Reifel, Robert 2126 N.W. 11th Avenue Gainesville FL 32603	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D THOMSEN, WILLIAM 131 HERON'S NEST LANE ST. AUGUSTINE FL 32080-5855	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD Thomsen, William 131 Heron's Nest Lane St. Augustine FL 32080-5855	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD WEINMAN, DOROTHY 6100 A1A S #114 ST. AUGUSTINE FL 32084	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/02)

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: Sandi Ward SIGNATURE REQUIRED 4/1/03 (904) 461-3200