


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2004 8:00 am
Secretary of State

01-08-2004 90050 048 ****61.25

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DOCUMENT # 769150 1. Entity Name SEAWIND CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 275 S. FIRST ST. 100 JACKSONVILLE BEACH, FL 32250			Mailing Address 275 S. FIRST ST. 100 JACKSONVILLE BEACH, FL 32250		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
4. Name and Address of Current Registered Agent MCBRIDE, RONALD 275 SOUTH FIRST STREET #404 JACKSONVILLE BEACH, FL 32250				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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.				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	
Filing Fee is \$61.25 Due by May 1, 2004				\$5.00 May Be Added to Fees	
SIGNATURE <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>				DATE	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS COWART, GRACE P 275 SOUTH FIRST STREET #702 JACKSONVILLE BEACH, FL			<input type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DPT MCBRIDE, RONALD A. 275 SOUTH FIRST STREET #404 JACKSONVILLE BEACH, FL			<input type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVP OWEN, ROBERT D JR 275 SOUTH FIRST STREET #602 JACKSONVILLE BEACH, FL 32250			<input type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVP RAINER, MARY L 275 SOUTH FIRST STREET #601 JACKSONVILLE BEACH, FL 32250			<input type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVP HALL, FREDERICK G 4233 TRADEWINDS DRIVE JACKSONVILLE BEACH, FL 32250			<input type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVP HALL, FREDERICK G 4233 TRADEWINDS DRIVE JACKSONVILLE BEACH, FL 32250			<input type="checkbox"/> Delete	
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: Ronald A. McBride, President					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date: 1/8/04 Daytime Phone #: 904-241-2533					