

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769548

FILED
Apr 29, 2005
Secretary of State

Entity Name: SEASIDE OF VILANO CONDOMINIUM ASSN., INC.

Current Principal Place of Business:

3385 COASTAL HIGHWAY
SAINT AUGUSTINE, FL 32084

New Principal Place of Business:

Current Mailing Address:

PO BOX 4306
SAINT AUGUSTINE, FL 32085

New Mailing Address:

FEI Number: 59-2337279

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TUTEN, DENA
5495 A1A SOUTH
SAINT AUGUSTINE, FL 32080 US

Name and Address of New Registered Agent:

BURK, MARIA
71 S. DIXIE HIGHWAY #6
SAINT AUGUSTINE, FL 32084 US

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: MARIA BURK

04/29/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KEATING, CHRISTOPHER
Address: 3385 N. COASTAL HWY #22
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: TD () Delete
Name: HOLMAN, LOUIS
Address: 3385 N. COASTAL HWY #20
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: SD () Delete
Name: HAGMAN, SHARON
Address: 3385 N. COASTAL HWY #24
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: D () Delete
Name: MOLINARO, PETER
Address: 3385 N. COASTAL HWY #26
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: KEATING, CHRISTOPHER
Address: 3385 N. COASTAL HWY #22
City-St-Zip: SAINT AUGUSTINE, FL 32084

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: PD () Change (X) Addition
Name: PIERCE, JAN
Address: 3385 N. COASTAL HWY #17
City-St-Zip: ST. AUGUSTINE, FL 32084

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: CHRISTOPHER KEATING

VP

04/29/2005

Electronic Signature of Signing Officer or Director

Date