

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009466

FILED
Apr 10, 2009
Secretary of State

Entity Name: SEA BREEZE LOFTS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

15121 LAGUNA DRIVE
FORT MYERS, FL 33908

New Principal Place of Business:

Current Mailing Address:

C/O STEVE MACKESY
711 TARPON BAY ROAD
SANIBEL, FL 33957

New Mailing Address:

FEI Number: 20-1737538

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MACKESY, STEVEN
711 TARPON BAY RD
SANIBEL, FL 33957 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: S () Delete
Name: MERRIMAN, GEORGE
Address: PO BOX 10003
City-St-Zip: BRECKENRIDGE, CO 80424

Title: T () Delete
Name: CRANE, TIM
Address: PO BOX 7399-285
City-St-Zip: BRECKENRIDGE, CO 80424

Title: P () Delete
Name: CRANE, DAWN
Address: P.O. BOX 7399-285
City-St-Zip: BRECKENRIDGE, CO 80424

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MERRIMAN, GEORGE
Address: PO BOX 10003
City-St-Zip: BRECKENRIDGE, CO 80424

Title: STD (X) Change () Addition
Name: CRANE, TIM
Address: PO BOX 7399-285
City-St-Zip: BRECKENRIDGE, CO 80424

Title: PD (X) Change () Addition
Name: CRANE, DAWN
Address: P.O. BOX 7399-285
City-St-Zip: BRECKENRIDGE, CO 80424

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: DAWN CRANE

PD

04/10/2009

Electronic Signature of Signing Officer or Director

Date