


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2007 08:00 AM
Secretary of State

DOCUMENT # N15305 1. Entity Name THE GOLF & SEA CONDOMINIUM ASSOCIATION, INC.	
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Principal Place of Business 809 GOLF & SEA BLVD. UNIT A-4 APOLLO BEACH, FL 33572	Mailing Address 809 GOLF & SEA BLVD. UNIT A-4 APOLLO BEACH, FL 33572
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DO NOT WRITE IN THIS SPACE



01042007 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-2798784	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KEARNEY, KAREN
 809 GOLF & SEA BLVD.
 UNIT A-4
 APOLLO BEACH, FL 33572

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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

Filing Fee is \$61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD KEARNEY, KAREN 809 GOLF & SEA BLVD., UNIT A-4 APOLLO BEACH, FL 33572
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD VAN EPOEL, STEVE 809 GOLF & SEA BOULEVARD SUITE 84 APOLLO BEACH, FL 33572
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SHINDORF, LOIS 809 GOLF & SEA BLVD #B 3 APOLLO BEACH, FL 33572
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 01/08/07-80038-025 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Karen E Kearney* Karen E Kearney ST 1/4/07 813-641-2363
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #