

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15305

FILED  
Jan 08, 2009  
Secretary of State

Entity Name: THE GOLF & SEA CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

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

**New Principal Place of Business:**

**Current Mailing Address:**

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

**New Mailing Address:**

FEI Number: 59-2798784      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

KEARNEY, KAREN  
809 GOLF & SEA BLVD.  
UNIT A-4  
APOLLO BEACH, FL 33572 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: STD ( ) Delete  
Name: KEARNEY, KAREN  
Address: 809 GOLF & SEA BLVD., UNIT A-4  
City-St-Zip: APOLLO BEACH, FL 33572

Title: VPD ( ) Delete  
Name: VAN EEPOEL, STEVE  
Address: 809 GOLF & SEA BOULEVARD SUITE 84  
City-St-Zip: APOLLO BEACH, FL 33572

Title: PD ( ) Delete  
Name: SHINDORF, LOIS  
Address: 809 GOLF & SEA BLVD #B 3  
City-St-Zip: APOLLO BEACH, FL 33572

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: PD (X) Change ( ) Addition  
Name: MAXWELL, MOLLY  
Address: 809 GOLF & SEA BLVD #B 2  
City-St-Zip: APOLLO BEACH, FL 33572

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: KAREN KEARNEY

STD

01/08/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date