

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004190

FILED
Apr 24, 2008
Secretary of State

Entity Name: SOUTHEASTERN SAILING ASSOCIATION, INC.

Current Principal Place of Business:

1648 S. LAKESHORE DR.
SARASOTA, FL 34231

New Principal Place of Business:

Current Mailing Address:

6610 1ST AVE W.
BRADENTON, FL 34209

New Mailing Address:

FEI Number: 59-3230931

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRISOSKY, RON
1648 SOUTH LAKESHORE DR.
SARASOTA, FL 34231 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: PD () Delete
Name: FRISOSKY, RONALD
Address: 1648 SOUTH LAKESHORE DR
City-St-Zip: SARASOTA, FL 34231

Title: VPD () Delete
Name: MASSEY, EDWARD
Address: 1015 RIVERSIDE DR
City-St-Zip: PALMETTO, FL 34221

Title: TRES () Delete
Name: MORRELL, STEVE
Address: 6610 1ST AVE WEST
City-St-Zip: BRADENTON, FL 34209

Title: DIR () Delete
Name: HAWKINS, SCOTT
Address: 850 AQUIDNECK AVE UNIT B
City-St-Zip: MIDDLETOWN, RI 02842

Title: DIR () Delete
Name: RUNDA, TOM
Address: 1717 MASSACHUSETTS AVE N.E.
City-St-Zip: ST PETERSBURG, FL 33703

Title: DIR () Delete
Name: CASEY, TOM
Address: 4585 LONG LEAF LANE
City-St-Zip: SARASOTA, FL 34241

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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Address:
City-St-Zip:

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

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

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: STEVE MORRELL

TRES

04/24/2008

Electronic Signature of Signing Officer or Director

Date