

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 07, 1999 8:00 am
Secretary of State

04-07-1999 90012 030 ****61.25

DOCUMENT # 746348

1. Corporation Name

SEAGROVE PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business

ELLIOTT MERRILL MANAGEMENT
1105-12TH ST
VERO BCH FL 32960
US

Mailing Address

ELLIOTT MERRILL MANAGEMENT
1105-12TH ST
VERO BCH FL 32960
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

30

3. Date Incorporated or Qualified

03/20/1979

4. FEI Number

59-2043643

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

ELLIOTT, RICHARD D
C/O ELLIOTT MERRILL MGMT.
1105 12TH ST
VERO BEACH FL 32960

10. Name and Address of New Registered Agent

81 Name merrill karen
82 Street Address (P.O. Box Number is Not Acceptable)
83 Schme
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0504, Florida Statutes.

SIGNATURE

Karen Merrill

3-16-99

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME CIANCI, NICK
STREET ADDRESS 176 EGRET LANE
CITY-ST-ZIP VERO BEACH FL
☒ DELETE

TITLE SD
NAME ZERVALIS, PETER
STREET ADDRESS 1765 PELICAN WAY
CITY-ST-ZIP VERO BEACH FL
☐ DELETE

TITLE TD
NAME LONG, RANDY
STREET ADDRESS 1776 CEDARLANE
CITY-ST-ZIP VERO BEACH FL
☐ DELETE

TITLE PD
NAME MILLER, WILLIAM
STREET ADDRESS 106 OCEAN WAY
CITY-ST-ZIP VERO BEACH FL
☒ DELETE

TITLE VP
NAME GAINSBORO, LEONARD
STREET ADDRESS 245 OCEAN WAY
CITY-ST-ZIP VERO BEACH FL
☐ DELETE

TITLE D
NAME PEPIN, GERALD
STREET ADDRESS 1776 CYPRESS LANE
CITY-ST-ZIP VERO BEACH FL
☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME Lyles, Robert
1.3 STREET ADDRESS 185 Egret Lane
1.4 CITY-ST-ZIP Vero Beach, FL 32963
☐ Change ☒ Addition

2.1 TITLE
2.2 NAME L. Homme, Paul
2.3 STREET ADDRESS 1165 Egret Lane
2.4 CITY-ST-ZIP Vero Beach, FL 32963
☐ Change ☒ Addition

3.1 TITLE
3.2 NAME Pearson, Frank
3.3 STREET ADDRESS 1825 Pelican Way
3.4 CITY-ST-ZIP Vero Beach, FL 32963
☐ Change ☒ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
☐ Change ☐ Addition

6.1 TITLE PD
6.2 NAME Pepin, Gerald
6.3 STREET ADDRESS 1776 Cypress Lane
6.4 CITY-ST-ZIP Vero Beach
☒ Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Gerald Pepin* REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

561-569-9853

Date

Daytime Phone #

CR2E037 (11/98)