

2004 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT

DOCUMENT # 722831

1. Entity Name  
SEA TERRACE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

209 SE 6TH ST  
BOYNTON BEACH, FL 33435 US

Mailing Address

P. O. BOX 1  
BOYNTON BEACH, FL 33425 US

**FILED**  
**Feb 09, 2004 08:00 AM**  
**Secretary of State**



01072004 No Chg-NP CR2E037 (10/03)

4. FEI Number  
59-1114218

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent

MONAHAN, RICHARD A  
209 S.E. 6 ST #2  
BOYNTON BEACH, FL 33435

**DO NOT WRITE  
IN THIS SPACE**

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, 2004

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
P/D  
MONAHAN, RICHARD  
STREET ADDRESS  
209 SE 6TH ST., #2  
CITY-ST-ZIP  
BOYNTON BEACH, FL 33435

TITLE  
NAME  
ST  
LICATA-MONAHAN, BARBARA  
STREET ADDRESS  
209 SE 6TH ST #10  
CITY-ST-ZIP  
BOYNTON BCH, FL 33435

TITLE  
NAME  
D  
BAUM, WALTER H  
STREET ADDRESS  
209 S. E. 6TH ST., #11  
CITY-ST-ZIP  
BOYNTON BEACH, FL 33435

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

U00000040901  
02/09/04-80066-015 61.25

**DO NOT WRITE  
IN THIS SPACE**

12. 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 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: *Richard A. Monahan* Richard A. Monahan 01- (561) 732-3910  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #