

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2006 8:00 am
Secretary of State

04-03-2006 90369 019 ****61.25

DOCUMENT # 740352

1. Entity Name
THE SEA BROOK PLACE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**1930 COMMERCE LANE
SUITE 1
JUPITER, FL 33458**

Mailing Address
**1930 COMMERCE LANE
SUITE 1
JUPITER, FL 33458**

60023958



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01222006 Chg-NP CR2E037 (11/05)

City & State

City & State

4. FEI Number
59-1819665

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**INGLIS, STEVE
1930 COMMERCE LANE
SUITE 1
JUPITER, FL 33458**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Delete
NAME **FREEBURN, FRANK**
STREET ADDRESS **114 SEABREEZE CIRCLE**
CITY-ST-ZIP **JUPITER, FL 33477**

TITLE **DIRECTOR** ☐ Change ☒ Addition
NAME **LESLIE DANIELS**
STREET ADDRESS **242 SEABREEZE CIRCLE**
CITY-ST-ZIP **JUPITER, FL 33478**

TITLE **DS** ☐ Delete
NAME **SODERMAN, SHARON**
STREET ADDRESS **220 SEABREEZE CIRCLE**
CITY-ST-ZIP **JUPITER, FL 33477**

TITLE **DIRECTOR** ☐ Change ☒ Addition
NAME **JAY WHITE**
STREET ADDRESS **130 SEABREEZE CIRCLE**
CITY-ST-ZIP **JUPITER, FL 33477**

TITLE **DVP** ☒ Delete
NAME **REID, NANCY**
STREET ADDRESS **250 SEABREEZE CIRCLE**
CITY-ST-ZIP **JUPITER, FL 33477**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **DVP** ☐ Delete
NAME **COX, RUTH**
STREET ADDRESS **147 SEABREEZE CIRCLE**
CITY-ST-ZIP **JUPITER, FL 33477**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **DP** ☐ Delete
NAME **CAMPBELL, MARY ANN**
STREET ADDRESS **134 SEABREEZE CIRCLE**
CITY-ST-ZIP **JUPITER, FL 33477**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☒ Delete
NAME **SCHOENING, JOYCE**
STREET ADDRESS **248 SEABREEZE CIRCLE**
CITY-ST-ZIP **JUPITER, FL 33477**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Frank Freeburn **FRANK FREEBURN**

3/31/06

561-252-8075

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #