2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#764003

FILED Mar 12, 2009 Secretary of State

Entity Name: SEAFIRE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 2180 W. SR 434 **SUITE 5000** LONGWOOD, FL 32779 **New Mailing Address: Current Mailing Address:** 2180 W. SR 434 SUITE 5000 LONGWOOD, FL 32779 US FEI Number: 59-2486863 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HART, JAMES W JR C/O SENTRY MANAGEMENT INC 2180 W. SR 434, STE. 5000 LONGWOOD, FL 32779 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete VPD () Change () Addition PASHUCK, EUGENE Name: Name: 8520 SUMMERVILLE PL Address: Address: City-St-Zip: ORLANDO, FL 32819 City-St-Zip: Title: PD () Delete Title: () Change () Addition RANDALL, MARK Name: Name: Address: 222 COACHMANS COVE Address: City-St-Zip: ALTAMONTE SPRINGS, FL 32701 City-St-Zip: Title: () Delete Title: (X) Change () Addition YOAKUM, DEBBIE CAMPBELL, JAMES Name: Name: 111 N ORANGE AVE STE 700 Address: 2121 HILL ST 7B Address: City-St-Zip: NEW SMYRNA BEACH, FL 32169 City-St-Zip: ORLANDO, 32 32169 Title: () Delete Title: TD (X) Change () Addition Name: WHILE, MARGARET Name: VERACKA, KATHLEEN 311 E MORSE BLVD #1-3 Address: Address: 2121 HILL ST #4A City-St-Zip: WINTER PARK, FL 32789 City-St-Zip: NEW SMYRNA BEACH, FL 32169 Title: () Delete Title: (X) Change () Addition HACKL, KATHY HACKL, KATHY Name: Name: 2121 HILL ST 7A 10610 OLD WAYSIDE RD Address: Address: NEW SMYRNA BEACH, FL 32169 City-St-Zip: City-St-Zip: CHARLOTTE, NC 28277

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: MARK RANDALL PD 03/12/2009