

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003286

FILED
Mar 31, 2009
Secretary of State

Entity Name: SEACOAST 5151 CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5151 COLLINS AVENUE
MIAMI BEACH, FL 33140

New Principal Place of Business:

Current Mailing Address:

5151 COLLINS AVENUE
SUITE #226
MIAMI BEACH, FL 33140

New Mailing Address:

FEI Number: 65-0630810 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SKRLD, INC.
201 ALHAMBRA CIRCLE, STE. 1102
CORAL GABLES, FL 33134 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: PRE () Delete
Name: NEMNI, SIMON
Address: 5151 COLLINS AVE., APT. #226
City-St-Zip: MIAMI BEACH, FL 33140

Title: VP () Delete
Name: STEFANO, FALBO
Address: 5151 COLLINS AVENUE - APT. 226
City-St-Zip: MIAMI BEACH, FL 33140

Title: TRE () Delete
Name: FIGUERAS, LOUIS
Address: 5151 COLLINS AVE. APT. #226
City-St-Zip: MIAMI BEACH, FL 33140

Title: SEC () Delete
Name: BROOKS, KENNETH V
Address: 5151 COLLINS AVE., APT. #226
City-St-Zip: MIAMI BEACH, FL 33140

Title: DIR () Delete
Name: TORRES, LISSETTE
Address: 5151 COLLINS AVE., APT. #226
City-St-Zip: MIAMI BEACH, FL 33140

Title: DIR () Delete
Name: ALVAREZ, JUAN C
Address: 5151 COLLINS AVE., APT. #226
City-St-Zip: MIAMI BEACH, FL 33140

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:

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

Title: DIR (X) Change () Addition
Name: BREIER, COREY
Address: 5151 COLLINS AVE., APT. #226
City-St-Zip: MIAMI BEACH, FL 33140

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: SIMON NEMNI

PRE

03/31/2009

Electronic Signature of Signing Officer or Director

Date