

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 222077

FILED
Apr 24, 2009
Secretary of State

Entity Name: SEA CREST APARTMENTS, INC.

Current Principal Place of Business:

1129 SEASIDE DR
SARASOTA, FL 34242

New Principal Place of Business:

Current Mailing Address:

1129 SEASIDE DR
SARASOTA, FL 34242

New Mailing Address:

FEI Number: 59-0860070 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RICCI, ROBERT
7074 HORIZON CIRCLE
WINDERMERE, FL 34786 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RICCI, ROBERT
Address: 7074 HORIZON CIRCLE
City-St-Zip: WINDERMERE, FL 34786

Title: VD () Delete
Name: MORRISON, ROBERT
Address: 3526 S. THREE B, S&K RD
City-St-Zip: GALENA, OH 43021

Title: T () Delete
Name: PACKEE, TOM
Address: 909 OLD TOWNE RD
City-St-Zip: OCONOMOWOC, WI 53066

Title: D () Delete
Name: JAMES, MEADE
Address: 10415 MULLIGAN CT
City-St-Zip: TAMPA, FL 33645

Title: S () Delete
Name: NEMACHECK, BARBARA
Address: 1108 LAKESHORE DR
City-St-Zip: GLADSTONE, MI 49837

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: () 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT RICCI

PD

04/24/2009

Electronic Signature of Signing Officer or Director

Date