

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 714074

FILED
Apr 04, 2005
Secretary of State

Entity Name: SEAGATE MANOR CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

400 SEASAGE DRIVE
DELRAY BEACH, FL 334836754

New Principal Place of Business:

Current Mailing Address:

400 SEASAGE DRIVE
DELRAY BEACH, FL 334836754

New Mailing Address:

FEI Number: 59-1258140

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPALL, MICHAEL
400 SEASAGE DR
DELRAY BEACH, FL 33483 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: PD () Delete
Name: ARLEN, ROBERT
Address: 400 SEASAGE DR.
City-St-Zip: DELRAY BCH, FL 33483

Title: VPD () Delete
Name: FRANK, JOHN
Address: 400 SEASAGE DR.
City-St-Zip: DELRAY BCH., FL 33483

Title: D () Delete
Name: HENDERSON, E.C.
Address: 400 SEA SAGE DR
City-St-Zip: DELRAY BCH, FL 33483

Title: D () Delete
Name: MARTINSEN, ROBERT
Address: 400 SEASAGE DR
City-St-Zip: DELRAY BCH, FL 33483

Title: SD () Delete
Name: SCHWARZ, ROBERT
Address: 400 SEASAGE DR.
City-St-Zip: DELRAY BCH, FL 33483

Title: D () Delete
Name: SHEFFLER, RICHARD
Address: 400 SEA SAGE DRIVE
City-St-Zip: DELRAY BEACH, FL 33483

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SCHWARZ, ROBERT
Address: 400 SEASAGE DR.
City-St-Zip: DELRAY BCH, FL 33483

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

Title: TRD (X) Change () Addition
Name: BOLAND, JOHN
Address: 400 SEA SAGE DR
City-St-Zip: DELRAY BCH, FL 33483

Title: SD (X) Change () Addition
Name: MARTINSEN, ROBERT
Address: 400 SEASAGE DR
City-St-Zip: DELRAY BCH, FL 33483

Title: D (X) Change () Addition
Name: HANTOS, ANNEMARIE S
Address: 400 SEASAGE DR.
City-St-Zip: DELRAY BCH, FL 33483

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ROBERT MARTINSEN

SD

04/04/2005

Electronic Signature of Signing Officer or Director

Date