


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 20, 2005 8:00 am
Secretary of State

04-20-2005 90338 038 ****61.25

DOCUMENT # 717177		
1. Entity Name SEAGATE OF HIGHLAND CONDOMINIUMS, INC.		

Principal Place of Business SEAGATE OF HIGHLAND HIGHLAND BEACH FL 33487 US	Mailing Address 3224 S OCEAN BLVD HIGHLAND BEACH FL 33487 US
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State
Zip	Country

50040113



1st MOORE CR2E037 (10/04)

4. FEI Number 59-1441222	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent SACHUK, KEITH 3224 SOUTH OCEAN BLVD HIGHLAND BEACH FL 33321	
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7. Name and Address of New Registered Agent	
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 date (NOTE: Registered Agent signature required when reinstating)

N/A
KEITH SACHUK

4-14-05
DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2005**

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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1VPD FLYNN, WILLIAM 3212 S. OCEAN BLVD. HIGHLAND BEACH FL 33487 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SVENSTRUP, WILLIAM 3310 S OCEAN HIGHLAND BEACH FL 33487 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS LEVINE, MAURICE 3300 S. OCEAN BLVD. HIGHLAND BEACH FL 33487 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2VP PRENDERCAST, ROBERT 3224 S. OCEAN BLVD. HIGHLAND BEACH FL 33487 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD JABBOUR, RAYMOND 3300 S OCEAN BLVD 517 HIGHLAND FL 33487 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT - PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2ND VICE PRESIDENT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition ANTHONY CANTALUPO 3224 S. OCEAN BLVD # 1009 HIGHLAND BEACH, FL 33487
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1ST VICE PRESIDENT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SECRETARY <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition JANET WHITE 3300 S. OCEAN BLVD # 317 HIGHLAND BCH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD TREASURER <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition ROBERT PERRY 3310 S. OCEAN BLVD # 130 HIGHLAND BCH, FL 33487
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

Manner n. Simon

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-14-05 (561) **276-5130**