

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720248

FILED
May 26, 2008
Secretary of State

Entity Name: SEA RANCH CIVIC ASSOCIATION, INC.

Current Principal Place of Business:

13711 VERONICA DR
HUDSON, FL 34667

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 5087
HUDSON, FL 34674

New Mailing Address:

FEI Number: 59-2313112 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

CRAUN, JAMES O JR.
6702 BOAT YARD DRIVE
HUDSON, FL 34667 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: D () Delete
Name: KRAMER, BILL
Address: 5929 BEVERLY DR
City-St-Zip: HUDSON, FL 34667

Title: D () Delete
Name: FLICK, LARRY
Address: 13707 BRITTON DR
City-St-Zip: HUDSON, FL 34667

Title: D () Delete
Name: HAGEN, ALFRED
Address: 6035 SEA RANCH DR., #800
City-St-Zip: HUDSON, FL 34667

Title: VP () Delete
Name: SMITH, JACK
Address: 6719 FLICKER AVE
City-St-Zip: HUDSON, FL 34667

Title: P () Delete
Name: CRAUN, JAMES O JR.
Address: 6702 BOAT YARD DR
City-St-Zip: HUDSON, FL 34667

Title: S () Delete
Name: FLICK, MARIE
Address: 13707 BRITTON DRIVE
City-St-Zip: HUDSON, FL 34667

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VAP (X) Change () Addition
Name: FLICK, LARRY
Address: 13707 BRITTON DR
City-St-Zip: HUDSON, FL 34667

Title: D (X) Change () Addition
Name: BULLARD, JOANNE
Address: 13540 MARIA DR.
City-St-Zip: HUDSON, FL 34667

Title: D (X) Change () Addition
Name: SMITH, JACK
Address: 6719 FLICKER AVE
City-St-Zip: HUDSON, FL 34667

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

SIGNATURE: JIM CRAUN

PRES

05/26/2008

Electronic Signature of Signing Officer or Director

Date