2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#726623

Entity Name: SOUTH SEA APARTMENTS, INC.

FILED Mar 15, 2007 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

606 SOUTH C STREET 606 SOUTH C STREET 204

101-206

LAKE WORTH, FL 33460 LAKE WORTH, FL 33460

Current Mailing Address: New Mailing Address:

P.O. BOX 243075 JNE MANAGEMENT BOYNTON BEACH, FL 33424 590 AMADOR LANE #7

WEST PALM BEACH, FL 33401

FEI Number: 65-0523901 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

SCHMIDT, TOM ESTIS, JEFFREY N **1718 RYE TER** 590 AMADOR LANE

WELLINGTON, FL 334148622 US WEST PALM BEACH, FL 33401 US

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: JEFFREY NEIL ESTIS 03/15/2007

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

TORVELA, ARTHUR SCHMIDT, TOM Name: Name: 606 SOUTH C STREET Address: 606 SOUTH C STREET #103 Address: City-St-Zip: LAKE WORTH, FL 33460 City-St-Zip: LAKE WORTH, FL 33460

Title: () Delete Title: (X) Change () Addition TURUNO, GUSTAVO Name: TORVELLO, ARTHUR Name: Address: 606 SOUTH C STREET, #101 Address: 606 SOUTH C STREET #102 City-St-Zip: LAKE WORTH, FL 33460 City-St-Zip: LAKE WORTH, FL 33460

Title: SD () Delete Title: SD (X) Change () Addition

NIERLINEN, SEIJA NIEMININS, ROB Name: Name: 800 NOTTINGHAM BLVD Address: Address: 606 SOUTH C STREET #101 City-St-Zip: WEST PALM BEACH, FL 33405 City-St-Zip: WEST PALM BEACH, FL 33460

Title: () Delete Title: TD () Change (X) Addition

Name: Name: BLUMBERG, ARNIE Address: Address: 606 SOUTH C STREET \$105 City-St-Zip: City-St-Zip: LAKE WORTH, FL 33460

Title: () Delete Title: () Change (X) Addition

STEIN, CHRISTOPHER Name: Name: 606 SOUTH C STREET #106 Address: Address: City-St-Zip: City-St-Zip: LAKE WORTH, FL 33460

I hereby certify that the information supplied with this filing does not qualify for the 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: TOM SCHMIDT PD 03/15/2007