

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727632

FILED  
Feb 27, 2005  
Secretary of State

Entity Name: SEACREST MANOR RESIDENTS ASSO., INC.

## Current Principal Place of Business:

140 MAR LEN DRIVE  
MELBOURNE BEACH, FL 32951 US

## New Principal Place of Business:

## Current Mailing Address:

140 MAR LEN DRIVE  
MELBOURNE BEACH, FL 32951 US

## New Mailing Address:

FEI Number: 59-1684223

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VON ACHEN, HEDY J  
140 MAR LEN DRIVE  
MELBOURNE BEACH, FL 32951 US

## Name and Address of New Registered Agent:

VON ACHEN, HEDY E  
140 MAR LEN DRIVE  
MELBOURNE BEACH, FL 32951 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: HEDY E VON ACHEN

02/27/2005

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: HEICK, CLEM W  
Address: 160 SEA CREST DRIVE  
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: VP ( ) Delete  
Name: WILSON, JOHN M  
Address: 125 SEA CREST DRIVE  
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: T ( ) Delete  
Name: VON ACHEN, HEDY E  
Address: 140 MAR LEN DRIVE  
City-St-Zip: MELBOURNE BEACH, FL 32951 US

Title: S ( ) Delete  
Name: GORDON, MARK  
Address: 130 MAR LEN DR  
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: TR ( ) Delete  
Name: CARON, ALFRED J  
Address: 120 SEA CREST DRIVE  
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: TR (X) Delete  
Name: HELWIG, THOMAS  
Address: 140 SEA CREST DRIVE  
City-St-Zip: MELBOURNE BEACH, FL 32951

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: HELWIG, THOMAS M  
Address: 140 SEA CREST DRIVE  
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: VP (X) Change ( ) Addition  
Name: GRAHAM, KEVIN W  
Address: 235 SEA CREST DRIVE  
City-St-Zip: MELBOURNE BEACH, FL 32951

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 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: HEDY E VON ACHEN

T

02/27/2005

Electronic Signature of Signing Officer or Director

Date