

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 729832

**FILED**  
**Apr 14, 2010**  
**Secretary of State**

**Entity Name:** ERROL BY THE SEA CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

4501 SOUTH ATLANTIC AVENUE  
NEW SMYRNA BEACH, FL 32169

**New Principal Place of Business:**

**Current Mailing Address:**

4501 SOUTH ATLANTIC AVENUE  
NEW SMYRNA BEACH, FL 32169

**New Mailing Address:**

**FEI Number:** 59-1637178

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MASON, CHENEY  
3391 LAKEVIEW OAKS DR  
LONGWOOD, FL 32779 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: SD  
Name: ERIKSSON, MARTHA  
Address: 2050 SPRINGS LANDING BLVD  
City-St-Zip: LONGWOOD, FL 32779

Title: D  
Name: MOORE, W. I  
Address: 2331 MIDDLECOFF COURT  
City-St-Zip: TITUSVILLE, FL 32780

Title: PD  
Name: MASON, CHENEY  
Address: 3391 LAKEVIEW OAKS DR  
City-St-Zip: LONGWOOD, FL 32779

Title: VPD  
Name: VINCI, ROGER  
Address: 671 QUIETWATER COVE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: TD  
Name: GLASSMEYER, ROBERT G  
Address: 9236 PENELOPE DR  
City-St-Zip: WEEKI WACHI, FL 34613

Title: D  
Name: DUGAN, ROBERT  
Address: 6624 ST. PARTIN PLACE  
City-St-Zip: ORLANDO, FL 32812

I hereby 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 all other like empowered.

SIGNATURE: ROBERT G. GLASSMYER

TD

04/14/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date