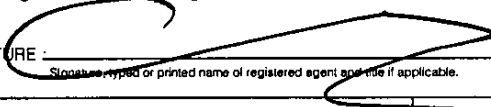
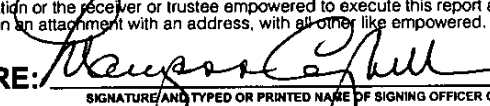


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2007 8:00 am
Secretary of State

03-30-2007 90138 035 ****61.25

DOCUMENT # 740352 1. Entity Name THE SEA BROOK PLACE CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 1930 COMMERCE LANE SUITE 1 JUPITER, FL 33458			Mailing Address 1930 COMMERCE LANE SUITE 1 JUPITER, FL 33458		
2. Principal Place of Business - No P.O. Box # 955 SE Federal Highway		3. Mailing Address 955 SE Federal Highway			
Suite, Apt. #, etc. Suite 202		Suite, Apt. #, etc. Suite 202			
City & State Stuart Florida		City & State Stuart Florida			
Zip 34994		Country USA		Zip 34994	
Country USA		4. FEI Number 59-1819665			
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent INGLIS, STEVE 1930 COMMERCE LANE SUITE 1 JUPITER, FL 33458			7. Name and Address of New Registered Agent Name Gary Fields, Esq Street Address (P.O. Box Number is Not Acceptable) 4400 PGA Blvd. Suite 900 City Palm Beach Gardens FL Zip Code 33410		
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:  (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2007		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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FREEBURN, FRANK 114 SEABREEZE CIRCLE JUPITER, FL 33477	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT Freeburn, Frank 114 Seabreeze Circle Jupiter, Florida 33477
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS SODERMAN, SHARON 220 SEABREEZE CIRCLE JUPITER, FL 33477	☐ Delete		☐ Change ☐ Addition	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DANIELS, LESLIE 242 SEABREEZE CIR JUPITER, FL 33478	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	OVP Daniels, Leslie 242 Seabreeze Circle Jupiter Florida 33477
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP COX, RUTH 147 SEABREEZE CIRCLE JUPITER, FL 33477	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Cox, Ruth 147 Seabreeze Circle Jupiter Florida 33477
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP CAMPBELL, MARY ANN 134 SEABREEZE CIRCLE JUPITER, FL 33477	☐ Delete		☐ Change ☐ Addition	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WHITE, JAY 130 SEABREEZE CIR JUPITER, FL 33477	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Frank DiNovi 175 Seabreeze Circle Jupiter, Florida 33477
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: 					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		Daytime Phone #