2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745759

FILED Jan 18, 2009 Secretary of State

Entity Name: SEMINOLE GARDENS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:	New Principal Place of Business:
431 VAN BUREN STREET D4	431 VAN BUREN STREET

FORT MYERS, FL 339163743 F-1

FORT MYERS, FL 339163743

Current Mailing Address: New Mailing Address:

431 VAN BUREN STREET D4 431 VAN BUREN STREET FORT MYERS, FL 339163743

FORT MYERS, FL 339163743

FEI Number: 59-2168613 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WILEY, JANE 431 VAN BUREN ST, B-7 FT MEYERS, FL 33916

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition JOHNSON, JOHN D WILEY, JANE Name: Name:

431 VAN BUREN ST D4 Address: 431 VAN BUREN ST B-7 Address: City-St-Zip: FORT MYERS, FL 33916 City-St-Zip: FORT MYERS, FL 33916

Title: Title: () Delete (X) Change () Addition WILEY, JOHN Name: COX, KAREN Name:

Address: 431 VAN BUREN ST E5 Address: 431 VAN BUREN ST F-5 City-St-Zip: FT MEYERS, FL 33916 City-St-Zip: FT MEYERS, FL 33916

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

REES, WILLIAM REES, DENISE Name: Name: 431 VAN BUREN ST. F-1 431 VAN BUREN ST. F-1 Address: Address: City-St-Zip: FORT MYERS, FL 33916 City-St-Zip: FORT MYERS, FL 33916

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

Name: BEES, STEPHEN Name: SHANKLIN, BEKKI 431 VAN BUREN ST, F-1 431 VAN BUREN ST, D-2 Address: Address: City-St-Zip: FORT MYERS, FL 33916 City-St-Zip: FORT MYERS, FL 33916

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

WILEY, JANE Name: Name: 431 VAN BUREN ST. # B7 Address: Address: City-St-Zip: FORT MYERS, FL 33916 City-St-Zip:

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

JOHNSON, ARLEEN Name: Name: Address: 431 VAN BUREN ST #D4 Address: FORT MYERS, FL 33916 City-St-Zip: 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: DENISE REES DT 01/18/2009