2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#750651

FILED May 01, 2005 Secretary of State

Entity Name: SEA GRAPE PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 14538 SW 119 AVENUE 381 N KROME AVENUE MIAMI, FL 33186 SUITE 205 HOMESTEAD, FL 33030 **Current Mailing Address:** New Mailing Address: 381 N KROME AVENUE P.O. BOX 1613 SUITE 205 HOMESTEAD, FL 330901613 US HOMESTEAD, FL 33030 US FEI Number: 59-2495004 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SYKES, JOHN 8605 FRANHO RD ATTN: SEAGRAPE TOWNHOME POA MIAMI, FL 33189 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition GOOSTREE, LINDA GOOSTREE, LINDA Name: Name: 20410 SW 85 AVE Address: 20410 SW 85 AVE Address: City-St-Zip: MIAMI, FL City-St-Zip: MIAMI, FL Title: Title: () Delete () Change () Addition HERRERA, DULCE Name: Name: Address: 20432 S.W. 85 AVE. Address: City-St-Zip: MIAMI, FL 33189 City-St-Zip: Title: () Delete Title: () Change () Addition SYKES, JOHN Name: Name: 8605 FRANJO ROAD Address: Address: City-St-Zip: MIAMI, FL City-St-Zip: Title: () Delete Title: VP D (X) Change () Addition Name: JOHNSON, DEBORAH Name: JOHNSON, DEBORAH 20412 SW 85 AVE 20412 SW 85 AVE Address: Address: City-St-Zip: MIAMI, FL 33189 City-St-Zip: MIAMI, FL 33189 Title: () Delete Title: (X) Change () Addition TRAIL, JOHNNIE FERGUSON, JACQUELINE Name: Name: 20294 SW 85 AVE 20401 SW 86 COURT Address: Address: City-St-Zip: MIAMI, FL City-St-Zip: MIAMI, FL 33189 Title: () Delete Title: () Change () Addition GOOSTZEE, MICHAEL W Name: Name: Address: 20410 SW 85 AVE Address: MIAMI, FL 33189 City-St-Zip: 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: MICHAEL GOOSTREE P 05/01/2005