

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750988

FILED  
Apr 18, 2009  
Secretary of State

Entity Name: SEBASTIAN AREA CIVIC ASSOCIATION, INC.

**Current Principal Place of Business:**

8025 129 COURT  
ROSELAND, FL 32957 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 82  
ROSELAND, FL 32957 US

**New Mailing Address:**

FEI Number: 59-2128978

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WILLHOFF, PATSY  
7990 129 PLACE  
ROSELAND, FL 32957 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: D ( ) Delete  
Name: EDDY, LEONARD  
Address: 601 COLLINS ST  
City-St-Zip: SEBASTIAN, FL 32958

Title: P ( ) Delete  
Name: WILLHOFF, RICHARD  
Address: 7990 129TH PL  
City-St-Zip: ROSELAND, FL 32957

Title: T ( ) Delete  
Name: WILLHOFF, PATSY  
Address: 7990 129 PLACE  
City-St-Zip: ROSELAND, FL

Title: S ( ) Delete  
Name: MIZE, KAREN  
Address: 625 ROLLING HILLS DR.  
City-St-Zip: SEBASTIAN, FL 32958

Title: VD ( ) Delete  
Name: MCMANUS, JAMES  
Address: 1044 WARBLER CT  
City-St-Zip: BAREFOOT BAY, FL 32976

Title: D ( ) Delete  
Name: MCMANUS, GAIL  
Address: 1044 WARBLER CT.  
City-St-Zip: BAREFOOT BAY, FL 32976

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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:

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 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: PATSY L. WILLHOFF

T

04/18/2009

Electronic Signature of Signing Officer or Director

Date