


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 11, 2008 08:00 A**  
**Secretary of State**

<b>DOCUMENT # 751473</b> 1. Entity Name <b>SEA TURTLE CONDOMINIUM ASSOCIATION, INC.</b>	
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Principal Place of Business <b>7201 RIDGEWOOD AVE CAPE CANAVERAL, FL 32920</b>	Mailing Address <b>650 NORTH ATLANTIC AVE UNIT 407 COCOA BEACH, FL 32931</b>
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01082008 No Chg-NP CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>59-2296008</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	

6. Name and Address of Current Registered Agent

**HERNANDEZ, TOMAS  
650 NORTH ATLANTIC AVE #407  
COCOA BEACH, FL 32931**

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_

<b>Filing Fee is \$61.25 Due by May 1, 2008</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>STD HERNANDEZ, TOMAS 650 NORTH ATLANTIC AVE #407 COCOA BEACH, FL 32931</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VD AZANDON, ALAIN 7201 RIDGEWOOD AVE #21 CAPE CANAVERAL, FL 32920</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD KEITH, STEPHEN 7201 RIDGEWOOD AVE #13 CAPE CANAVERAL, FL 32920</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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**DO NOT WRITE  
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01/11/08-80023-022 61.25

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:** *Tomas L. Hernandez* **TOMAS LUIS HERNANDEZ** 1-8-08 321-867-5459

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #