

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751554

FILED  
Feb 13, 2009  
Secretary of State

**Entity Name:** SEA ECHO CONDOMINIUM ASSOCIATION,INC.

**Current Principal Place of Business:**

400 AUBURN DR.  
DAYTONA BEACH, FL 32118 US

**New Principal Place of Business:**

**Current Mailing Address:**

182 S YOUNGE ST  
ORMOND BEACH, FL 32174 US

**New Mailing Address:**

182 S YONGE ST  
ORMOND BEACH, FL 32174 US

**FEI Number:** 59-2297330

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TODD REALTY & MANAGEMENT, INC.  
182 S YONGE ST  
ORMOND BEACH, FL 32174 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: T ( ) Delete  
Name: CACIC, MARLENE  
Address: 400 AUBURN DRIVE #1  
City-St-Zip: DAYTONA BEACH, FL 32118

Title: P ( ) Delete  
Name: COCCI, LILIAN  
Address: 51 OCEAN WAY DR.  
City-St-Zip: PORT ORANGE, FL 32127

Title: VP ( ) Delete  
Name: PEARSON, STELLA  
Address: 400 AUBURN, #8  
City-St-Zip: DAYTONA BEACH, FL 32118

Title: S (X) Delete  
Name: MOOREHEAD, JOHN  
Address: 143 UNIVERSITY DR  
City-St-Zip: ORMOND BEACH, FL 32176

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

Title: T (X) Change ( ) Addition  
Name: HASTINGS, ANITA H T  
Address: 2700 OCEAN SHORE BLVD  
City-St-Zip: ORMOND BEACH, FL 32176

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: MOOREHEAD, JOHN  
Address: 143 UNIVERSITY DR  
City-St-Zip: ORMOND BEACH, FL 32176

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: KAREN J. BUCHANAN

RA

02/13/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date