2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#753056

FILED Apr 08, 2009 Secretary of State

Entity Name: SEAVIEW CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
14700 GUL MADEIRA	LF BLVD. BEACH, FL 33708	US			
Current Mailing Address:			New Maili	New Mailing Address:	
14700 GUL MADEIRA	F BLVD. BEACH, FL 33708	US			
FEI Number:	59-2103240 FEI I	Number Applied For()	FEI Number Not Appl	licable () Certificate of Status Desired ()	
Name and	Address of Curren	t Registered Agent:	Name and	Address of New Registered Agent:	
KING, SUS 14700 GUL MADEIRA		US			
	named entity submit of Florida.	s this statement for the p	urpose of changing i	ts registered office or registered agent, or both,	
SIGNATUF	RE:				
	Electronic Sig	nature of Registered Age	nt	Date	
OFFICERS	S AND DIRECTORS	:	ADDITION	IS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	D () Delete HILL, ALLEN 234 WHISPERING LAW PALOS PARK, IL 6046	KES DR	Title: Name: Address: City-St-Zip:	D (X) Change () Addition SEALE, TIM 1063 LONG RUN RD. MCKEESPORT, PA 15132	
Title: Name: Address: City-St-Zip:	P () Delete MCCANDLESS, TIM 3025 GREENE RD. GREENE, IA 50636		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () Delete KRAMER, LEROY 27685 BUTLER CENTE CLARKSVILLE, IA 506	ER RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () Delete NADENIK, LOU 701 BURR OAK LN. PROSPECT HTS, IL 6		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () Delete CLARK, THOMAS 1063 LONG RUN RD MCKEESPORT, PA 18		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete CLARK, THOMAS JR 1063 LONG RUN RD MCKEESPORT, PA 15		Title: Name: Address: City-St-Zip:	() Change () Addition	

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: TOM CLARK V 04/08/2009