

2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

FILED
Apr 17, 2008 8:00 am
Secretary of State

04-17-2008 90022 042 ****61.25

DOCUMENT # 755801

1. Entity Name
**SEA TERN OF HUTCHINSON ISLAND CONDOMINIUM
ASSOCIATION, INC.**



Principal Place of Business Mailing Address
C/O ELLIOTT MERRILL COMMUNITY MANAGEMENT C/O ELLIOTT MERRILL COMMUNITY MANAGEMENT
835 20TH PLACE 835 20TH PLACE
VERO BEACH, FL 32960 VERO BEACH, FL 32960 US

40003000



2. Principal Place of Business - No P.O. Box # 3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01292008 Chg-NP CR2E037 (12/06)

4. FEI Number
59-2184466

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MERRILL, CRAIG
C/O ELLIOTT MERRILL COMMUNITY MANAGEMENT
835 20TH PLACE
VERO BEACH, FL 32960

Name Ross Earle + Bonan P.A.
Street Address (P.O. Box Number is Not Acceptable) 759 South Federal Hwy
Royal Palm Financial Center, Suite 212
City Stuart FL 34994

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

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE S
NAME BRENNER, HOWARD ☐ Delete
STREET ADDRESS 1630 SEAWAY DR #307
CITY-ST-ZIP FORT PIERCE, FL 34949

TITLE President ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE P
NAME BRENNER, HARRIET ☐ Delete
STREET ADDRESS 1603 SEAWAY DRIVE. 307
CITY-ST-ZIP FT PIERCE, FL 34949

TITLE Secretary ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T
NAME HANSEN, ROBERT ☒ Delete
STREET ADDRESS 1630 SEAWAY DR., #305
CITY-ST-ZIP FORT PIERCE, FL 34949

TITLE Treasurer ☐ Change ☒ Addition
NAME Thomas James
STREET ADDRESS 1630 Seaway Dr. #106
CITY-ST-ZIP Ft. Pierce, FL 34949

TITLE VP
NAME NADEN, DEAN ☐ Delete
STREET ADDRESS 1630 SEAWAY DR., #306
CITY-ST-ZIP FORT PIERCE, FL 34949

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME HANSEN, HELEN ☒ Delete
STREET ADDRESS 1630 SEAWAY DR #305
CITY-ST-ZIP FORT PIERCE, FL 34949

TITLE Director ☐ Change ☒ Addition
NAME Delores Tate
STREET ADDRESS 1630 Seaway Dr. #107
CITY-ST-ZIP Ft. Pierce, FL 34949

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Howard H. Brenner HOWARD H. BRENNER 3/8/08 (772) 461-0701
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #