

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757563

FILED  
Jan 04, 2008  
Secretary of State

Entity Name: SEA WINDS OF MARCO, INC.

## Current Principal Place of Business:

890 S. COLLIER BLVD.  
MARCO ISLAND, FL 34145

## New Principal Place of Business:

## Current Mailing Address:

890 S. COLLIER BLVD.  
MARCO ISLAND, FL 34145

## New Mailing Address:

FEI Number: 59-2267134

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ADAMS, JOSEPH E.  
BANK OF AMERICA CENTER  
4501 TAMiami TRAIL NORTH, SUITE 214  
NAPLES, FL 341030000 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: CLAUSS, JAY  
Address: 30 LEIGH CT  
City-St-Zip: RANDOLPH, NJ 07869

Title: VP ( ) Delete  
Name: ANTONELLIS, DOMENIC,  
Address: 285 GROVE ST  
City-St-Zip: WELLESLEY, MA 02482

Title: T ( ) Delete  
Name: GULESERIEN, CHARLES  
Address: 95 COLLEGE AVE  
City-St-Zip: ARLINGTON, MA 02474

Title: P ( ) Delete  
Name: MINASIAN, EDWARD  
Address: 107 WINSON AVE  
City-St-Zip: WATERTOWN, MA 02472

Title: D ( ) Delete  
Name: SIPALA, DOMERICK  
Address: 215 COOLIDGE AVE  
City-St-Zip: ORLTEY, FL

Title: S ( ) Delete  
Name: DEVITO, CONSTANZO  
Address: 11 LACY LANE  
City-St-Zip: LOUDONVILLE, NY 12211

## 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: JAMES ERB

MGR.

01/04/2008

Electronic Signature of Signing Officer or Director

Date