

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757682

FILED
Apr 02, 2008
Secretary of State

Entity Name: SEA BREEZE OF MADEIRA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

13500 GULF BLVD
MADIERA BEACH, FL US

New Principal Place of Business:

Current Mailing Address:

7300 PARK STREET
SEMINOLE, FL 33777 US

New Mailing Address:

FEI Number: 59-2249847 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

RESOURCE PROPERTY MANAGEMENT
7300 PARK STREET
SEMINOLE, FL 33777 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: VPD () Delete
Name: DELL, CLIFF
Address: 1309 N RIVERHILLS DR
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: PD () Delete
Name: HATFIELD, GLENDA
Address: 70 SKEES RD
City-St-Zip: BIG CLIFTY, KY 42712

Title: SD (X) Delete
Name: HAYDIS-KNOX, ABBEY
Address: 14705 OAKVINE DR
City-St-Zip: LUTZ, FL 33559

Title: TD () Delete
Name: MOTT, JOHN
Address: 16877 DRIFTWOOD DR
City-St-Zip: MACOMB TOWNSHIP, MI 48042

Title: D (X) Delete
Name: ALVAREZ, ARTHUR
Address: 10303 CARROLL COVE PL
City-St-Zip: TAMPA, FL 33612

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: ALVAREZ, ARTHUR
Address: 10303 CARROLL COVE PLACE
City-St-Zip: TAMPA, FL 33612

Title: S/T (X) Change () Addition
Name: HATFIELD, GLENDA
Address: 70 SKEES RD
City-St-Zip: BIG CLIFTY, KY 42712

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

Title: VP (X) Change () Addition
Name: MOTT, JOHN
Address: 16877 DRIFTWOOD DR
City-St-Zip: MACOMB TOWNSHIP, MI 48042

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: ARTHUR ALVAREZ

P/D

04/02/2008

Electronic Signature of Signing Officer or Director

Date