

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759215

FILED  
Jan 10, 2006  
Secretary of State

**Entity Name:** THE SEA PEARL CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

CHARLES M. DAWSON  
PO BOX 361021  
MELBOURNE, FL 329361021 US

**New Principal Place of Business:**

PO BOX 33241  
INDIALANTIC, FL 329033241 US

**Current Mailing Address:**

CHARLES M. DAWSON  
PO BOX 361021  
MELBOURNE, FL 329361021 US

**New Mailing Address:**

PO BOX 33241  
INDIALANTIC, FL 329033241 US

**FEI Number:** 59-2497501

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BOHNE, KARL W JR.  
780 S. APOLLO BLVD  
MELBURN, FL 32901 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: PD ( ) Delete  
Name: LINDEN, THERESA  
Address: 151 PARADISE BOULEVARD #2  
City-St-Zip: INDIALANTIC, FL 32903

Title: VPD ( ) Delete  
Name: MCLEONARD, RISHA  
Address: 151 PARADISE BOULEVARD #3  
City-St-Zip: INDIALANTIC, FL 32903

Title: STD ( ) Delete  
Name: HOLTZMAN, TIFFANY  
Address: 151 PARADISE BOULEVARD #4  
City-St-Zip: INDIALANTIC, FL 32903

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

Title: VPD (X) Change ( ) Addition  
Name: LINDEN, THERESA  
Address: 151 PARADISE BOULEVARD #2  
City-St-Zip: INDIALANTIC, FL 32903 US

Title: PDM (X) Change ( ) Addition  
Name: MCLEONARD, RISHA  
Address: 159 PARADISE BOULEVARD #3  
City-St-Zip: INDIALANTIC, FL 32903 US

Title: STDC (X) Change ( ) Addition  
Name: HILL, CHRISTOPHER  
Address: 151 PARADISE BOULEVARD #4  
City-St-Zip: INDIALANTIC, FL 32903 US

I hereby certify that the information supplied with this filing does not qualify for the 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: CHRISTOPHER HILL

STDC

01/10/2006

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

\_\_\_\_\_  
Date