

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 16, 2007 8:00 am**  
**Secretary of State**

01-16-2007 90208 028 \*\*\*\*61.25

**DOCUMENT # 760208**

1. Entity Name  
**SEAWATCH AT MARATHON CONDOMINIUM  
ASSOCIATION, INC.**



Principal Place of Business  
**P.O. BOX 522896  
MARATHON, FL 33052**

Mailing Address  
**P.O. BOX 522896  
MARATHON, FL 33052**



01032007 Chg-NP CR2E037 (12/06)

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

4. FEI Number  
**59-2166784**

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

**ROGEL, DAVID H ESQ  
5201 BLUE LAGOON DRIVE SUITE 100  
MIAMI, FL 33126**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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, 2007**

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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VP  
KOOLE, SUSAN  
6102 GOLF FLORENCE BLVD  
MARATHON, FL 33050 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**Susan Moore** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
V  
DUNCAN, FRED  
8203 GULF OF MEXICO BLVD  
MARATHON, FL 33050 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
S  
STEYZ, PHILP  
GULF OF MEXICO BLVD  
MARATHON, FL 33050 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**Philip Stern** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
T  
FRIEDMAN, BRIAN  
6103 GULF OF MEXICO  
MARATHON, FL 33050 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
SALA, LINDA NAEDER  
6301 GULF OF MEXICO BLVD  
MARATHON, FL 33050 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

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

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:

*Linda Naeder Sala*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*11 Jan 07 305-289-8929*  
Date Daytime Phone #

# ATTACHMENT

60001147

760208

JoAnn B. Inghram, CPA, PA  
Certified Public Accountant  
5800 Overseas Highway, Suite #4  
Marathon, FL 33050  
(305) 743-5454  
FAX 743-9197

## INSTRUCTIONS FOR FILING FLORIDA CORPORATION ANNUAL REPORT

Please review report before filing to ensure that there are no omissions or misstatements. If you have any questions, don't hesitate to call.

- 1) Make any additions, deletions, or changes to officers, directors, and registered agent.
- 2) Form to be signed and dated by an officer or director.
- 3) Enclose a check payable to Florida Department of State in the amount of \$150.00.
- 4) Send form and check in the attached envelope no later than May 1<sup>st</sup>.