2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2008
Secretary of State

DOCUMENT# 760376

Entity Name: SEA WOODS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2180 W SR 434
SUITE 5000
LONGWOOD, FL 32779 US

New Principal Place of Business:

Current Mailing Address:

2180 W SR 434
SUITE 5000
LONGWOOD, FL 32779 US

New Mailing Address:

FEI Number: 59-1299564 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HART, JAMES W JR
SENTRY MANAGEMENT, INC.
2180 W STATE ROAD 434, SUITE 5000
LONGWOOD, FL 32779 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: PTD ( ) Delete
Name: HALLACY, JOHN
Address: 4302 GULL COVE
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: D ( ) Delete
Name: LEVINGS, JACK
Address: 4214 GULL COVE
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: D ( ) Delete
Name: KRAKER, JAMES
Address: 4225 GULL COVE
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: VPSD ( ) Delete
Name: SKINNER, MARTHA
Address: 4324 SEA MIST DR
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: D ( ) Delete
Name: AYLWARD, ANDREW
Address: 4218 GULL COVE
City-St-Zip: NEW SMYRNA BEACH, FL 32169

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition
Name: AQUADRO, RICHARD
Address: 640 KENNEDY RD
City-St-Zip: LEEDS, MA 01053

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

Title: SD (X) Change ( ) Addition
Name: SKINNER, MARTHA
Address: 4324 SEA MIST DR
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: VPD (X) Change ( ) Addition
Name: AYLWARD, ANDREW
Address: 4218 GULL COVE
City-St-Zip: NEW SMYRNA BEACH, FL 32169

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: JOHN HALLACY PTD 03/20/2008
Electronic Signature of Signing Officer or Director Date