2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2009
Secretary of State

DOCUMENT# 762378

Entity Name: SEASPRAY PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1309 SEASPRAY LANE
SANIBEL, FL 33957 US

New Principal Place of Business:

Current Mailing Address:

1311 SEASPRAY LANE
SANIBEL, FL 33957 US

New Mailing Address:

1320 SEASPRAY LANE
SANIBEL, FL 33957 US

FEI Number: 59-2796575 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MATHEY JR., DAVID W.
1309 SEASPRAY LANE
SANIBEL, FL 33957 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: MATHEY, DAVID W. JR.
Address: 1309 SEASPRAY LANE
City-St-Zip: SANIBEL, FL

Title: SD ( ) Delete
Name: BARNES, JEAN G
Address: 1320 SEASPRAY LANE
City-St-Zip: SANIBEL, FL

Title: VD ( ) Delete
Name: HOLWAY, RICHARD
Address: 1314 SEASPRAY LANE
City-St-Zip: SANIBEL, FL

Title: TD ( ) Delete
Name: TUCKER, KATHY
Address: 1311 SEASPRAY LANE
City-St-Zip: SANIBEL, FL 33957

Title: D ( ) Delete
Name: MCHALE, JAMES T
Address: 1329 SEASPRAY LANE
City-St-Zip: SANIBEL, FL 33957

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TD (X) Change ( ) Addition
Name: BARNES, THOMAS
Address: 1320 SEASPRAY LANE
City-St-Zip: SANIBEL, FL

Title: VD (X) Change ( ) Addition
Name: SCOTT, DIANA
Address: 1313 SEASPRAY LANE
City-St-Zip: SANIBEL, FL 33957 LE

Title: SD (X) Change ( ) Addition
Name: WEAVER, SHARA
Address: 1323 SEASPRAY LANE
City-St-Zip: SANIBEL, FL 33957

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: DAVID W, MATHEY, JR. PD 03/28/2009
Electronic Signature of Signing Officer or Director — Date