

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 15, 2009
Secretary of State**

DOCUMENT# 763865

Entity Name: SEAVIEW TOWNHOUSE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

193 WOODETTE DR
DUNEDIN, FL 34698

New Principal Place of Business:

Current Mailing Address:

193 WOODETTE DR
DUNEDIN, FL 34698

New Mailing Address:

FEI Number: 59-2213353 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, SODEN
193 WOODETTE DR
DUNEDIN, FL 34698 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: SMITH, SODEN
Address: 193 WOODETTE DR
City-St-Zip: DUNEDIN, FL 34698

Title: VPD () Delete
Name: CHRISTOPHER, CHARLES
Address: 199 WOODETTE DR
City-St-Zip: DUNEDIN, FL 34698

Title: ST () Delete
Name: CLAUD, SHERRIL
Address: 195 WOODETTE DR
City-St-Zip: DUNEDIN, FL 34698

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: CLAUD, SHERRIL
Address: 195 WOODETTE DR
City-St-Zip: DUNEDIN, FL 34698

Title: S () Change (X) Addition
Name: WILLIAM, MCDONALD
Address: 197 WOODETTE DRIVE
City-St-Zip: DUNEDIN, FL 34698

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: SHERRIL A. CLAUD

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03/15/2009

Electronic Signature of Signing Officer or Director

Date