

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765841

FILED
Apr 22, 2008
Secretary of State

Entity Name: SHIPWATCH ONE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O RESOURCE PROP. MGMT., INC.
7330 PARK STREET
LARGO, FL 33777

New Principal Place of Business:

Current Mailing Address:

C/O RESOURCE PROPERTY MANAGEMENT
7300 PARK STREET
SEMINOLE, FL 33777 US

New Mailing Address:

FEI Number: 59-2389594

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RESOURCE PROPERTY MANAGEMENT
7300 PARK STREET
SEMINOLE, FL 33777 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: T () Delete
Name: COTOIA, ANTHONY
Address: 11730 SHIPWATCH #802
City-St-Zip: LARGO, FL 33774

Title: VP () Delete
Name: LASHBROOK, JIM
Address: 11730 SHIPWATER DR #808
City-St-Zip: LARGO, FL 33774

Title: P () Delete
Name: SANSBURY, BARB
Address: 11730 SHIPWATCH DRIVE #807
City-St-Zip: LARGO, FL 33774

Title: S () Delete
Name: FISCHER, WILLIAM
Address: 11730 SHIPWATCH DRIVE #601
City-St-Zip: LARGO, FL 33774

Title: D () Delete
Name: KEPENACH, JOHN
Address: 11730 SHIPWATCH DR #205
City-St-Zip: LARGO, FL 33774

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: S (X) Change () Addition
Name: KEPENACH, JOHN
Address: 11730 SHIPWATCH DRIVE #808
City-St-Zip: LARGO, FL 33774

Title: D (X) Change () Addition
Name: SCOBLE, JOHN
Address: 11730 SHIPWATCH DR #301
City-St-Zip: LARGO, FL 33774

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: BARB SANSBURY

P/D

04/22/2008

Electronic Signature of Signing Officer or Director

Date