

5/21

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Jun 23, 2002 8:00 am
Secretary of State

05-02-2002 90096 005 ****61.25

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 766899

1. Entity Name

SEAWINDS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

10044 S OCEAN DRIVE
 JENSEN BCH FL 34957
 US

Mailing Address

C/O PRIDE PROP MGMT
 111 EGRET DRIVE
 JUPITER FL 33458
 US

SEA WINDS CONDI
 10044 S. OCEAN DR
 JENSEN BEACH, FL 34957



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

4. FEI Number

59-2454522

Applied For

Not Applicable

Zip

Country

Zip

Country

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

Name

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

City

FL

Zip Code

PIECIEWICZ
 PIECEWICZ ALAN
 44 EGRET DR
 JUPITER FL 33458
 33458 561-575-1502

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-stating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

Make Check Payable to
 Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	☐ Delete
NAME	MOORADIAN, HARY	
STREET ADDRESS	10044 S. OCEAN DRIVE (1008)	
CITY-ST-ZIP	JENSEN BEACH FL 34957	
TITLE	VPO	☐ Delete
NAME	SPERANZA, VIOLA	
STREET ADDRESS	10044 S. OCEAN DR. (404)	
CITY-ST-ZIP	JENSEN BEACH FL 34957	
TITLE	SD	☐ Delete
NAME	ESPOSITO, WAYNE	
STREET ADDRESS	1044 S. OCEAN DRIVE (401)	
CITY-ST-ZIP	JENSEN BEACH FL 34957	
TITLE	TD	☒ Delete
NAME	MESSINA, FRANK	
STREET ADDRESS	10044 S. OCEAN DRIVE (202)	
CITY-ST-ZIP	JENSEN BEACH FL 34957	
TITLE	PD	☐ Delete
NAME	VILLNAVE, DONALD	
STREET ADDRESS	10044 S OCEAN DR #901	
CITY-ST-ZIP	JENSEN BEACH FL	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VPD (TD)	☒ Change ☐ Addition
NAME	SPERANZA, VIOLA	
STREET ADDRESS	10044 S. OCEAN DR. (404)	
CITY-ST-ZIP	JENSEN BEACH FL 34957	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 817, 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)