

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 29, 2006 8:00 am
Secretary of State

03-29-2006 90119 004 ****61.25

DOCUMENT # 768599

1. Entity Name
SILVER SEAS BEACH CLUB ASSOCIATION, INC.



Principal Place of Business Mailing Address

101 N FORT LAUDERDALE BEACH BLVD 101 N FORT LAUDERDALE BEACH BLVD
 FORT LAUDERDALE FL 33304 FORT LAUDERDALE FL 33304



2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number Applied For

59-2354182 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

1st MOORE CR2E037 (10/05)

6. Name and Address of Current Registered Agent

BOVAIRD, ELIZABETH K.
 101 N FORT LAUDERDALE BEACH BLVD
 FORT LAUDERDALE FL 33304

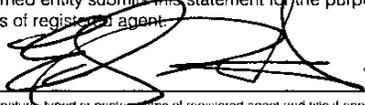
7. Name and Address of New Registered Agent

Name **ELIZABETH F. BOVAIRD**

Street Address (P.O. Box Number is Not Acceptable)
101 N FORT LAUDERDALE BEACH BLVD

City **FT. LAUDERDALE** FL Zip Code **33304**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  **Treasurer** **MARCH 24, 2006**

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering) DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

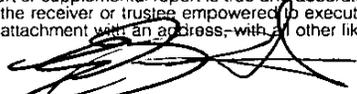
10. OFFICERS AND DIRECTORS

TITLE	TRES	<input type="checkbox"/> Delete
NAME	BOVAIRD, ELIZABETH F	
STREET ADDRESS	4570 NW 10TH WAY	
CITY-ST-ZIP	FORT LAUDERDALE FL 33309	
TITLE	DV	<input type="checkbox"/> Delete
NAME	COLLINS, THOMAS J	
STREET ADDRESS	1167 HILLSBORO MILE, APT. 314	
CITY-ST-ZIP	POMPANO BEACH FL 33062	
TITLE	SD	<input type="checkbox"/> Delete
NAME	RAINBOW, GRAHAM	
STREET ADDRESS	271 TIMBER RUN WAY	
CITY-ST-ZIP	COCOA FL 32926	
TITLE	D	<input type="checkbox"/> Delete
NAME	MCMAMARA, JACK	
STREET ADDRESS	610 SE 10TH ST	
CITY-ST-ZIP	POMPANO BEACH FL 33060	
TITLE	PD	<input type="checkbox"/> Delete
NAME	BOVAIRD, DONALD	
STREET ADDRESS	5407 NW 27TH ST	
CITY-ST-ZIP	LAUDERHILL FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 617, 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:  **March 24, 2006**