2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2009
Secretary of State

DOCUMENT# N00000003437

Entity Name: SEAGROVE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

220 82ND ST
HOLMES BEACH, FL 34217

New Principal Place of Business:

Current Mailing Address:

220 82ND ST
HOLMES BEACH, FL 34217

New Mailing Address:

FEI Number: 65-1042304 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NOWICK, MATTHEW H
220 82ND ST
HOLMES BEACH, FL 34217 US

Name and Address of New Registered Agent:

NOWICKI, MATTHEW H
220 82ND ST
HOLMES BEACH, FL 34217 US

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: MATTHEW H. NOWICKI 03/20/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete
Name: NOWICKI, MATHEW H
Address: 220 82ND ST
City-St-Zip: HOLMES BEACH, FL 34217

Title: VD ( ) Delete
Name: BEAOLE, DENNIS
Address: 220 82ND ST
City-St-Zip: HOLMES BEACH, FL 34217

Title: D ( ) Delete
Name: NOWICIA, JANET E
Address: 220 82ND ST
City-St-Zip: HOLMES BEACH, FL 34217

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition
Name: NOWICKI, ELAINE
Address: 220 82ND ST
City-St-Zip: HOLMES BEACH, FL 34217

Title: D (X) Change ( ) Addition
Name: NOWICKI, JANET E
Address: 220 82ND ST
City-St-Zip: HOLMES BEACH, FL 34217

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: MATTHEW H. NOWICKI PRES 03/20/2009
Electronic Signature of Signing Officer or Director Date