

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004877

FILED
Apr 05, 2008
Secretary of State

Entity Name: EVERGLADES SEABOARD VILLAS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 417
EVERGLADES CITY, FL 341390417

New Principal Place of Business:

600 COLLIER AVENUE
EVERGLADES CITY, FL 34139

Current Mailing Address:

P.O. BOX 417
EVERGLADES CITY, FL 341390417

New Mailing Address:

PO BOX186
EVERGLADES CITY, FL 34139

FEI Number: 82-0562069

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NAPLES-LAWDOCK, INC.
1395 PANTHER LANE
SUITE 300
NAPLES, FL 34109 US

Name and Address of New Registered Agent:

KUNNA, JOHN G TREASUR
614 COLLIER AVENUE
EVERGLADES CITY, FL 34139 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: JOHN G. KUNNA

04/05/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: VARALLO, NICHOLAS
Address: 594 COLLIER AVE
City-St-Zip: EVERGLADES CITY, FL 34139

Title: DP () Delete
Name: WRIGHT, CHARLES
Address: 620 COLLIER AVENUE
City-St-Zip: EVERGLADES CITY, FL 34139

Title: DVS () Delete
Name: WEST, ELIZABETH
Address: 1387 HARBORVIEW EAST
City-St-Zip: HOLLYWOOD, FL 33019

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TREA (X) Change () Addition
Name: KUNNA, JOHN
Address: 614 COLLIER AVE
City-St-Zip: EVERGLADES CITY, FL 34139

Title: DP (X) Change () Addition
Name: MAYS, HAROLD
Address: 600 COLLIER AVENUE
City-St-Zip: EVERGLADES CITY, FL 34139

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

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: JOHN KUNNA

TREA

04/05/2008

Electronic Signature of Signing Officer or Director

Date