

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

**FILED**  
**Feb 16, 2006 8:00 am**  
**Secretary of State**  
02-16-2006 90058 022 \*\*\*\*61.25

**DOCUMENT # N00605**

1. Entity Name

**SEMINOLE LANDINGS CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business

**190 SEMINOLE LANE  
COCOA BEACH FL 32931**

Mailing Address

**190 SEMINOLE LANE  
COCOA BEACH FL 32931**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

**59-2410768**

Applied For

Not Applicable

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

**RIGERMAN, MARILYN A  
200 N FIRST ST  
COCOA BEACH FL 32931**

Name

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

City

**FL**

Zip Code

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

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

(NOTE: Registered Agent signature required when reconstituting)

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 ☒ Delete  
NAME SHYMANSKI, ROBERT  
STREET ADDRESS 190 SEMINOLE LANE 501  
CITY - ST - ZIP COCOA BEACH FL 32931

TITLE ☒ Delete  
NAME SYMANSKI, EILEEN  
STREET ADDRESS 190 SEMINOLE LN, STE 102  
CITY - ST - ZIP COCOA BEACH FL 32931

TITLE ☒ Delete  
NAME BRODSKY, GERDA  
STREET ADDRESS 190 SEMINOLE LANE, #404  
CITY - ST - ZIP COCOA BEACH FL 32931

TITLE ☒ Delete  
NAME ORR, MICHAEL  
STREET ADDRESS 190 SEMINOLE LANE  
CITY - ST - ZIP COCOA BEACH FL 32931

TITLE ☒ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☒ Addition  
NAME *President*  
STREET ADDRESS *Gerda Stockler*  
CITY - ST - ZIP *190 Seminole Lane #404  
Cocoa Beach, Fla (321) 7842732*

TITLE ☐ Change ☒ Addition  
NAME *Vice President*  
STREET ADDRESS *Michael Orr*  
CITY - ST - ZIP *190 Seminole Lane #501 Tel 321 7990807  
Cocoa Beach, Fla. (321) 32931*

TITLE ☐ Change ☒ Addition  
NAME *Secretary*  
STREET ADDRESS *Viggo Bastalac*  
CITY - ST - ZIP *445 Myoma Rd. Tel 412-776 1222  
Mass. Pa. 16046*

TITLE ☐ Change ☒ Addition  
NAME *Director*  
STREET ADDRESS *Robert Herdeng*  
CITY - ST - ZIP *190 Seminole Lane #203  
Cocoa Beach, Fla. (321) 9614569*

TITLE ☐ Change ☒ Addition  
NAME *Director*  
STREET ADDRESS *Steven Bastalac*  
CITY - ST - ZIP *445 Myoma Rd. Tel 412-776 1222  
Mass, Pa 16046*

TITLE ☐ Change ☒ Addition  
NAME *Director*  
STREET ADDRESS *Thanton Stockler*  
CITY - ST - ZIP *190 Seminole Lane #404 Tel 321 7842732  
Cocoa Beach, Fla. 32931*

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 *GERDA STOCKLER Pres. January 31, 2006*