2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2007
Secretary of State

DOCUMENT# N01000001193

Entity Name: SEA GATE WEST HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

195 PINTA CR
MERRITT ISLAND, FL 32953

New Principal Place of Business:

3022 NINA COURT
MERRITT ISLAND, FL 32953

Current Mailing Address:

195 PINTA CR
MERRITT ISLAND, FL 32953

New Mailing Address:

3022 NINA COURT
MERRITT ISLAND, FL 32953

FEI Number: 57-1148075 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MOTT, STEVE D
195 PINTA CR
MERRITT ISLAND, FL 32953 US

Name and Address of New Registered Agent:

DRUMMOND, BARTON W
3022 NINA COURT
MERRITT ISLAND, FL 32953 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: BARTON W. DRUMMOND 03/30/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: MOTT, STEVE
Address: 195 PINTA CIR
City-St-Zip: MERRITT ISLAND, FL 32953

Title: DV ( ) Delete
Name: SCHEFFLER, BRUCE L
Address: 174 PINTA CR
City-St-Zip: MERRITT ISLAND, FL 32953

Title: DV (X) Delete
Name: HARGIS, JAMES F JR
Address: 2902 NINA CT
City-St-Zip: MERRITT ISLAND, FL 32953

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: DRUMMOND, BARTON
Address: 3022 NINA COURT
City-St-Zip: MERRITT ISLAND, FL 32953

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: BARTON W. DRUMMOND DP 03/30/2007
Electronic Signature of Signing Officer or Director Date