

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001270

FILED
Jan 12, 2009
Secretary of State

Entity Name: SISTERS OF THE SEA, INC.

Current Principal Place of Business:

634 LOWER 8TH AVENUE SOUTH
JACKSONVILLE BEACH, FL 32250

New Principal Place of Business:

Current Mailing Address:

634 LOWER 8TH AVENUE SOUTH
JACKSONVILLE BEACH, FL 32250

New Mailing Address:

FEI Number: 59-3705417

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZENENS, VALERIE
634 LOWER 8TH AVE., SOUTH
JACKSONVILLE BEACH, FL 32250 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: ZEVEN, VALERIE L
Address: 634 LOWER 8TH AVENUE SOUTH
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: VP () Delete
Name: MILLER, ERIN
Address: 3097 LA RESERVE DR
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: S () Delete
Name: SEYDA, SAMANTHA
Address: 3543 BAY ISLAND CIR
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: DT () Delete
Name: SEYDA, SAMANTHA
Address: 3543 BAY ISLAND CIRCLE
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: T () Delete
Name: PERRY, KRIS
Address: 3965 PETITE DR W
City-St-Zip: JACKSONVILLE BEACH, FL 32250

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: ZEVEN, VALERIE L
Address: 634 LOWER 8TH AVENUE SOUTH
City-St-Zip: JACKSONVILLE BEACH, FL 32250

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

Title: SEC (X) Change () Addition
Name: SEYDA, SAMANTHA
Address: 3543 BAY ISLAND CIR
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: PR (X) Change () Addition
Name: WITKAMP, SABRAH
Address: 393 ALTARA DRIVE
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: TRES (X) Change () Addition
Name: PERRY, KRIS
Address: 775 SABALO DRIVE
City-St-Zip: ATLANTIC BEACH, FL 32233

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: VALERIE L. ZEVEN

PRES

01/12/2009

Electronic Signature of Signing Officer or Director

Date