

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009075

FILED
Mar 31, 2009
Secretary of State

Entity Name: SEAFAN HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1855 SE 4TH ST
POMPANO BCH., FL 33060 US

New Principal Place of Business:

320 NW 69TH AVE.
APT. 150
PLANTATION, FL 33317 US

Current Mailing Address:

1855 SE 4TH ST
POMPANO BCH., FL 33060 US

New Mailing Address:

829 SW 51ST TERRACE
CAPE CORAL, FL 33914 US

FEI Number: 43-2056015

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRICK, WILLIAM W JR
1216 EAST ATLANTIC BLVD.
SUITE 7
POMPANO BEACH, FL 33060 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: D () Delete
Name: CASE, GARY
Address: 320 NW 69TH AVE APT. 150
City-St-Zip: PLANTATION, FL 33317

Title: D () Delete
Name: BROCK, JASON
Address: 1851 SE 4TH ST
City-St-Zip: POMPANO BEACH, FL 33060

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CASE, GARY
Address: 320 NW 69TH AVE APT. 150
City-St-Zip: PLANTATION, FL 33317 US

Title: STD (X) Change () Addition
Name: BROWN, BRENDA
Address: 829 SW 51ST TERRACE
City-St-Zip: CAPE CORAL, FL 33914 US

Title: D () Change (X) Addition
Name: BERECZ, KAREN
Address: 845 SNAPDRAGON LANE
City-St-Zip: PLANO, TX 75075 US

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: BRENDA BROWN

ST

03/31/2009

Electronic Signature of Signing Officer or Director

_____ Date