

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005561

FILED  
Feb 24, 2009  
Secretary of State

**Entity Name:** SEASIDE AT ANASTASIA CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

205 ATLANTIS CIRCLE  
SAINT AUGUSTINE, FL 32080

**New Principal Place of Business:**

**Current Mailing Address:**

205 ATLANTIS CIRCLE  
SAINT AUGUSTINE, FL 32080

**New Mailing Address:**

378 A1A BEACH BOULEVARD  
SAINT AUGUSTINE, FL 32080

**FEI Number:** 80-0073687

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GRISWOLD, GAIL A CAM  
205 ATLANTIS CIRCLE  
SAINT AUGUSTINE, FL 32080 US

**Name and Address of New Registered Agent:**

KATHER, WANDA CAM  
378 A1A BEACH BOULEVARD  
SAINT AUGUSTINE, FL 32080 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: WANDA KATHER

02/24/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: SEC ( ) Delete  
Name: SCHNEIDER, EDWARD  
Address: 9277 JULY LANE  
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: TRES ( ) Delete  
Name: FLEMING, KATHLEEN  
Address: 245 ATLANTIS CIRCLE SUITE 202C  
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: PRES ( ) Delete  
Name: CUPOLO, STEVE  
Address: 9299 JULY LANE  
City-St-Zip: ST AUGUSTINE, FL 32080

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: TRES (X) Change ( ) Addition  
Name: JOSEPH, CARLI  
Address: 11410 SOUTHWORTH AVE  
City-St-Zip: PLYMOUTH, MI 48170

Title: PRES (X) Change ( ) Addition  
Name: CUPOLO, STEVE  
Address: 661 A1A BEACH BOULEVARD  
City-St-Zip: ST AUGUSTINE, FL 32080

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: WANDA KATHER

CAM

02/24/2009

Electronic Signature of Signing Officer or Director

Date