

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000473

FILED
Jul 03, 2007
Secretary of State

Entity Name: COMMUNITY THRIFT BOUTIQUE BY THE SEA , INC.

Current Principal Place of Business:

1464 OCEAN SHORE BLVD.
ORMOND BEACH, FL 32176

New Principal Place of Business:

Current Mailing Address:

1546 OCEAN SHORE BLVD.
ORMOND BEACH, FL 32176

New Mailing Address:

1464 OCEAN SHORE BLVD.
ORMOND BEACH, FL 32176

FEI Number: 20-0696027 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SCIACCA, MARIE
1464 OCEAN SHORE BLVD
ORMOND BEACH, FL 32176 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: PSTD () Delete
Name: SCIACCA, MARIE
Address: 5500 OCEAN SHORE BLVD., UNIT 83
City-St-Zip: ORMOND BEACH, FL 32176

Title: D () Delete
Name: SCIACCA, GLORIA
Address: 5500 OCEAN SHORE BLVD., UNIT 83
City-St-Zip: ORMOND BEACH, FL 32176

Title: D () Delete
Name: DALE, MELISSA
Address: 1546 OCEAN SHORE BLVD.
City-St-Zip: ORMOND BEACH, FL 32176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: DALE, MELISSA
Address: 4242 NORTHWEST 44TH TERR
City-St-Zip: COCONUT CREEK, FL 33073

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: MARIE SCIACCA

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07/03/2007

Electronic Signature of Signing Officer or Director

Date