2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001973

FILED Sep 01, 2005 Secretary of State

Entity Name: SEA FOR TWO CONDOMINIUM ASSOCIATION, INC.

Current Princip	oal Place of Business:	New Princi	pal Place of Business:

2937 LACONCHA DR 129 51 ST

CLEARWATER, FL 33762 HOLMES BEACH, FL 34217

Current Mailing Address: New Mailing Address:

2937 LACONCHA DR 129 51 ST

CLEARWATER, FL 33762 HOLMES BEACH, FL 34217

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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: Name and Address of New Registered Agent:

MULLINS, THOMAS W 2937 LACONCHA DR

CLEARWATER, FL 33762 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: D (X) Change () Addition Name: MULLINS, THOMAS W Name: FISHMAN, PHILLIP

Address: 2937 LACONCHA DR Address: 131 51 ST

City-St-Zip: CLEARWATER, FL 33762 City-St-Zip: HOLMES BEACH, FL 34217

Title: DS () Delete Title: D (X) Change () Addition Name: CHASEY, JOHN H II Name: PACK, MARY

Address: 808 35 AVE DR W Address: 131 51 ST

City-St-Zip: PALMETTO, FL 34221 City-St-Zip: HOLMES BEACH, FL 34217

Title: DT () Delete Title: D (X) Change () Addition Name: MCCALEB, MICHAEL Name: CHRISTENSON, VERA

Address: 507 72 ST Address: 129 51 ST

City-St-Zip: HOLMES BEACH, FL 34217 City-St-Zip: HOLMES BEACH, FL 34217

 $\label{eq:title:Title:D} {\sf Title:} \qquad {\sf D} \qquad (\) {\sf Change} \ ({\sf X}) \ {\sf Addition}$

Name: TANCOCO, GEORGINA

Address: Address: 129 51 ST

City-St-Zip: City-St-Zip: HOLMES BEACH, FL 34217

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PHILLIP FISHMAN D 09/01/2005