

2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Mar 08, 2010
Secretary of State

DOCUMENT# N04000011710

Entity Name: SEMINOLE ISLE TOWNHOME ASSOCIATION, INC.**Current Principal Place of Business:**C/O PROFESSIONAL MANAGEMENT COMPANY
5901 SUN BLVD., SUITE 203
ST. PETERSBURG, FL 33715**New Principal Place of Business:****Current Mailing Address:**C/O PROFESSIONAL MANAGEMENT COMPANY
5901 SUN BLVD., SUITE 203
ST. PETERSBURG, FL 33715**New Mailing Address:****FEI Number:** 20-2053065**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**PBM
970 LAKE CARILLON DR
102
ST PETERSBURG, FL 33716 US**Name and Address of New Registered Agent:**JONATHAN J DAMONTE
12110 SEMINOLE BLVD
LARGO, FL 33778 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: JONATHAN DAMANTE

03/08/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: DRYDEN, DONNA
Address: 7253 KEY HAVEN ROAD
City-St-Zip: SEMINOLE, FL 33777

Title: VP/D
Name: ATENIESE, GUY
Address: 7253 KEY HAVEN ROAD
City-St-Zip: SEMINOLE, FL 33777

Title: S/D
Name: HAMBARGER, JUDITH
Address: 7253 KEY HAVEN ROAD
City-St-Zip: SEMINOLE, FL 33777

Title: PD
Name: HARRIS, CRAIG
Address: 7253 KEY HAVEN ROAD
City-St-Zip: SEMINOLE, FL 33777

I hereby 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 all other like empowered.

SIGNATURE: WCN

MGR

03/08/2010

Electronic Signature of Signing Officer or Director

Date