2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE: X

Apr 07, 2008 8:00 am Secretary of State DOCUMENT # N04122 04-07-2008 90069 015 ****70.00 1. Entity Name SETON COURT ASSOCIATION, INC. Principal Place of Business Mailing Address 65 SETON TRAIL #2 65 SETON TRAIL #2 ORMOND BEACH, FL 32176-6501 ORMOND BEACH, FL 32176-6501 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 65 Seton 65 Seton TRac Suite, Apt. #, etc. Suite, Apt. #, etc. 03132008 Chg-NP CR2E037 (12/06) City & State City & State 4. FEI Number 59-2786139 Applied For DRMOND Banch RMOND Not Applicable \$8.75 Additional 5. Certificate of Status Desired บร 45 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Webb, Deborah BIDWELL, JOHN TREAS Street Address (P.O. Box Number is Not Acceptable) 65 SETON TRAIL #2 ORMOND BEACH, FL 32176-6501 City Demond Beach Zip Code 32176 8. 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. I am familiar with, and accept the obligations of registered agent choral We veborah Webb SIGNATURE . 9. Election Campaign Financing \$5.00 May 8e Make check payable to Filing Fee is \$61.25 Trust Fund Contribution. Fiorida Department of State Due by May 1, 2008 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE ☐ Delete Change ☐ Addition TITLE morahan, Charles 65 Seton Trail # 7 ormano Batch, FL. 32176 MONAHAN, CHARLES NAME NAME STREET ADDRESS 65 SETON TR. # 8 STREET ADDRESS ORMOND BEACH, FL 32176 COY-ST-ZIP CITY-ST-ZIP T/S Change Addition TILE Delete ππе 65 Seton Trail 2 ormond beach, FL BIDWELL, JOHN NAME NAME 65 SETON TRAIL #2 STREET ADDRESS STREET ADDRESS FL. 32176 ORMOND BEACH, FL 321766501 CITY-ST-ZIP CITY-ST-ZIP Detete ☐ Change Addition TITLE mie Theisen, Daniel 165 Seton Trail To Ormono Beach, MINER, JAMIE NAME NAME STREET ADDRESS 65 SOTON TR #12 STREET ADDRESS CITY-ST-ZIP ORMOND BEACH, FL 32176 SMY-ST-ZP ππιε Delete TITLE Change Addition MANITSAS, GLORIA Webb, Deborah #21 05 Seton Trail #21 opmond Baach, FL. 32176 NAME NAME STREET ADDRESS 65 SETON TRAIL #14 STREET ADDRESS ORMOND BEACH, FL 32176 C/TY-ST-7/P CITY-ST-7/P ☐ Change Addition गाLE Detere TITLE Mull, allen 127 65 Seton Trail #27 Ormono Baach, FL. 32176 MAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE Frattin, Andrew 18 CAPISTRANO DRIVE NAME NAME STREET ADDRESS STREET ADDRESS DRMOND BEACH, FL. 32176 CITY-ST-7IP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

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ATTACHMENT DOCUMENT # N04122 SETON COURT ASSOCIATION, INC. Principal Place of Business Mailing Address 65 SETON TRAIL #2 85 SETON TRAIL #2 ORMOND BEACH, Ft 32176-6501 ORMOND BEACH, FL-32176-6501 4062070 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03132008 Chg-NP CR2E037 (12/06) Applied For City & State FEI Number 59-2786139 Not Applicable Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BIDWELL, JOHN TREAS 65 SELON TRAIL #2 Street Address (P.O. Box Number is Not Acceptable) ORMOND BEACH, FL 32176-6501 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \$5.00 May Be Filing Fee is \$61.25 9. Election Campaign Financing Make check payable to Due by May 1, 2008 Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE πпе CO-Secretary Addition Delete ☐ Change MONAHAN, CHARLES NAME Frattin, Robin 18 CAPISTRANO DR 65 SETON TR, # 8 STREET ADORESS STREET ADDRESS CITY-ST-ZIP ORMOND BEACH, FL 32176 CTY-ST-7P DRMOND BEACH, FL. 32176 ☐ Delete TITI F ☐ Change ■ Addition BIDWELL, VOHN NAME NAME 65 SETON TRAIL #2 STREET ADDRESS STREET ADORESS CITY-ST-ZIP ORMOND BEACH, FL 321766501 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition MINER, JAMIE NAME NAME STREET ADDRESS 65 SOTON TR #12 STREET ADDRESS ORMOND BEACH, FL 32176 CITY-ST-78P CITY-ST-ZIP ☐ Delete TITLE TITL F Change Addition MANITSAS, GLÓRIA NAME NAME 65 SETON TRAIL #14 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORMOND BEACH, FL 32176 CITY-ST-ZIP MLE ☐ Delete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE: