2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011228

FILED Jan 07, 2006 Secretary of State

Entity Name: SEA SUNRISE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 751 OCEAN DRIVE APT#1 JUNO BEACH, FL 33408 **New Mailing Address: Current Mailing Address:** 751 OCEAN DRIVE APT#1 JUNO BEACH, FL 33408 FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BIRDSALL, JAMES C BIRDSALL, JAMES C 751 OCEAN DRIVE 751 OCEAN DRIVE APT#1 APT#1 JUNO BEACH, FL US JUNO BEACH, FL 33408 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: JCBIRDSALL 01/07/2006 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BIRDSALL, JAMES C Name: Name: 751 OCEAN DRIVE APT # 1 Address: Address: City-St-Zip: JUNO BEACH, FL 33408 City-St-Zip: Title: VP/D Title: () Delete () Change () Addition Name: HOFF, SUSAN Name: Address: 751 OCEAN DRIVE APT # 9 Address: City-St-Zip: JUNO BEACH, FL 33408 City-St-Zip: Title: T/D () Delete Title: () Change () Addition BIRDSALL, CLAIRE C Name: Name: 751 OCEAN DRIVE APT # 1 Address: Address: City-St-Zip: JUNO BEACH, FL 33408 City-St-Zip: Title: S/D () Delete Title: () Change () Addition Name: SMITH, KELLY K Name: 751 OCEAN DRIVE APT # 5 Address: Address: City-St-Zip: JUNO BEACH, FL 33408 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JCBIRDSALL P/D 01/07/2006