

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05395

**FILED**  
**Mar 13, 2010**  
**Secretary of State**

**Entity Name:** SEA GULL LANDING HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

81 JANA DRIVE  
PONCE INLET, FL 32127 US

**New Principal Place of Business:**

**Current Mailing Address:**

81 JANA DRIVE  
PONCE INLET, FL 32127 US

**New Mailing Address:**

**FEI Number:** 06-1230960

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

VILLANELLA, JOSEPH J  
46 JANA DR  
PONCE INLET, FL 32127 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: PRES  
Name: VILLANELLA, JOSEPH J  
Address: 46 JANA DR  
City-St-Zip: PONCE INLET, FL 32127 US

Title: VP  
Name: BLANDFORD, WALTER  
Address: 40 SEA HAV  
City-St-Zip: PONCE INLET, FL 32127 US

Title: TREA  
Name: REBELLO, ANN M  
Address: 50 JANA DR  
City-St-Zip: PONCE INLET, FL 32127 US

Title: SEC  
Name: MCCLOSKEY, SUSAN R  
Address: 48 JANA DR  
City-St-Zip: PONCE INLET, FL 32127 US

Title: LARG  
Name: BUSCEMI, CRAIG  
Address: 38 JANA DR  
City-St-Zip: PONCET INLET, FL 32127 US

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: JOSEPH J VILLANELLA

PRES

03/13/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date