

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05465

FILED
Jan 05, 2009
Secretary of State

Entity Name: SEBASTIAN EXECUTIVE BUILDING, INC.

Current Principal Place of Business:

1623 NORTH U.S. 1, SUITE A-4
SEBASTIAN, FL 32958 US

New Principal Place of Business:

1623 NORTH U.S. 1, SUITE B-4
SEBASTIAN, FL 32958 US

Current Mailing Address:

1623 NORTH U.S. 1, SUITE A-4
SEBASTIAN, FL 32958 US

New Mailing Address:

1623 NORTH U.S. 1, SUITE B-4
SEBASTIAN, FL 32958 US

FEI Number: 59-2532555

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'ROURKE, CHRIS M
1623 U.S. 1, SUITE A-4
SEBASTIAN, FL 32958 US

Name and Address of New Registered Agent:

DONINI, ANTHONY
1623 U.S. 1, SUITE B-4
SEBASTIAN, FL 32958 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: ANTHONY DONINI

01/05/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DONINI, ANTHONY
Address: 1623 US HWY 1 STE B-4
City-St-Zip: SEBASTIAN, FL 32958

Title: VP () Delete
Name: SCOTT, TOM
Address: 1623 US HWY 1 STE B-1
City-St-Zip: SEBASTIAN, FL 32958

Title: T () Delete
Name: O'ROURKE, CHRIS
Address: 1623 US HWY 1 STE A-4
City-St-Zip: SEBASTIAN, FL 32958

Title: S () Delete
Name: MAYNARD, KIM
Address: 1623 U.S. HWY 1, SUITE B-5
City-St-Zip: SEBASTIAN, FL 32958

Title: S (X) Delete
Name: MAYNARD, KIM
Address: 1623 US HWY 1 STE B-5
City-St-Zip: SEBASTIAN, FL 32958

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DONINI, ANTHONY PREZ
Address: 1623 US HWY 1 STE B-4
City-St-Zip: SEBASTIAN, FL 32958

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: CHRIS O'ROURKE

T

01/05/2009

Electronic Signature of Signing Officer or Director

Date