

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05573

FILED  
Mar 09, 2009  
Secretary of State

**Entity Name:** SEAWAY VILLAS OF DELRAY BEACH CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1028 CASUARINA RD  
BOX B  
DELRAY BEACH, FL 33483

**New Principal Place of Business:**

**Current Mailing Address:**

1028 CASUARINA RD  
BOX B  
DELRAY BEACH, FL 33483

**New Mailing Address:**

**FEI Number:** 59-2678250

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VICKIE, LOVELL SEC  
1028 CASUARINA RD  
BOX B  
DELRAY BEACH, FL 33483 US

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

LOVELL, VICKIE SEC  
1028 CASUARINA RD  
BOX B  
DELRAY BEACH, FL 33483 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: VICKIE LOVELL

03/09/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MINSKY, LARRY  
Address: 1032 CASUARION RD  
City-St-Zip: DELRAY BEACH, FL 33483

Title: TD ( ) Delete  
Name: ANN, HUGHES  
Address: 1028 CASUARINA RD  
City-St-Zip: DELRAY BEACH, FL 33483

Title: SD ( ) Delete  
Name: VICKIE, LOVELL  
Address: 1040 CASUARINA RD  
City-St-Zip: DELRAY BEACH, FL 33483

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: MINSKY, LARRY  
Address: 1032 CASUARINA RD  
City-St-Zip: DELRAY BEACH, FL 33483

Title: TD (X) Change ( ) Addition  
Name: HUGHES, ANN  
Address: 1028 CASUARINA RD  
City-St-Zip: DELRAY BEACH, FL 33483

Title: SD (X) Change ( ) Addition  
Name: LOVELL, VICKIE  
Address: 1040 CASUARINA RD  
City-St-Zip: DELRAY BEACH, FL 33483

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: FRANCES E. COSTELLO

BKPR

03/09/2009

Electronic Signature of Signing Officer or Director

Date