

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 25, 2007 8:00 am**  
**Secretary of State**

04-25-2007 90176 020 \*\*\*\*61.25

<b>DOCUMENT # N09684</b>					
1. Entity Name SEAGULL ESTATES PROPERTY OWNERS' ASSOCIATION, INC.					
Principal Place of Business 201 DANIEL DR SANIBEL, FL 33957			Mailing Address P O BOX 100 SANIBEL, FL 33957 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		01112007 Chg-NP CR2E037 (12/06)	
Zip		Country		4. FEI Number NOT APPLICABLE	
				Applied For Not Applicable	
6. Name and Address of Current Registered Agent				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
MACKASY, STEVE 711 TARPON BAY ROAD SUITE D SANIBEL, FL 33957				7. Name and Address of New Registered Agent	
				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
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.				FL Zip Code	
SIGNATURE _____					
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
				<b>Make check payable to Florida Department of State</b>	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	P ENGLISH, JOHN <input type="checkbox"/> Delete	TITLE	D Nancy Pierce <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	ENGLISH, JOHN	NAME	235 Daniel Drive		
STREET ADDRESS	251 CHRISTOFER COURT	STREET ADDRESS	Sanibel FL 33957		
CITY-ST-ZIP	SANIBEL, FL 33957	CITY-ST-ZIP			
TITLE	T FLECK, DAVID <input checked="" type="checkbox"/> Delete	TITLE	ST Sandy Bordiuk <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	FLECK, DAVID	NAME	247 Christopher Court		
STREET ADDRESS	204 DANIEL DRIVE	STREET ADDRESS	Sanibel FL 33957		
CITY-ST-ZIP	SANIBEL, FL 33957	CITY-ST-ZIP			
TITLE	SD NORPELL, SUSAN <input checked="" type="checkbox"/> Delete	TITLE	TD Frank Owen <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	NORPELL, SUSAN	NAME	220 Daniel Drive		
STREET ADDRESS	13966 ESTILL DR	STREET ADDRESS	Sanibel FL 33957		
CITY-ST-ZIP	LAKEWOOD, OH 44107	CITY-ST-ZIP			
TITLE	D LUND, SALLY <input checked="" type="checkbox"/> Delete	TITLE	D Peggy Hupfeldt <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	LUND, SALLY	NAME	248 Christopher Court		
STREET ADDRESS	240 CHRISTOPHER CT	STREET ADDRESS	Sanibel FL 33957		
CITY-ST-ZIP	SANIBEL, FL 33957	CITY-ST-ZIP			
TITLE	D ADAMS, DONNA <input checked="" type="checkbox"/> Delete	TITLE	VO Paul Emilius <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	ADAMS, DONNA	NAME	225 Daniel Drive		
STREET ADDRESS	9581 VIRGINIA AVE	STREET ADDRESS	Sanibel FL 33957		
CITY-ST-ZIP	SANIBEL, FL 33957	CITY-ST-ZIP			
TITLE	D EMILIUS, JOAN <input checked="" type="checkbox"/> Delete	TITLE	D William Kayotis <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	EMILIUS, JOAN	NAME	244 Daniel Drive		
STREET ADDRESS	225 DANIEL DR	STREET ADDRESS	Sanibel FL 33957		
CITY-ST-ZIP	SANIBEL, FL 33957	CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing 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: <i>John English</i>		John English		3-17-07 239-395-0308	
SIGNATURE, TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	