

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 19, 2005
Secretary of State**

DOCUMENT# N16789

Entity Name: SEABROOK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

6145 MISSION DR.
ORLANDO, FL 32810

New Principal Place of Business:

Current Mailing Address:

6145 MISSION DR.
ORLANDO, FL 32810

New Mailing Address:

FEI Number: 59-2861655 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GIRDHARI, SANKAR
6145 MISSION DR.
ORLANDO, FL 32810 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: PD () Delete
Name: GIRDHARI, SANKAR
Address: 6145 MISSION DR.
City-St-Zip: ORLANDO, FL 32810

Title: DVP () Delete
Name: RAFIQ, BIBI S
Address: 6145 MISSION DR.
City-St-Zip: ORLANDO, FL 32810

Title: DST () Delete
Name: SANKAR, LOAK D
Address: 148-11 116 AVE.
City-St-Zip: JAMAICA, NY 11436

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 for the exemption stated in Section 119.07(3)(i), 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: GIRDHARI SANKAR

PD

01/19/2005

Electronic Signature of Signing Officer or Director

_____ Date