

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17089

FILED
Jan 09, 2012
Secretary of State

Entity Name: SEABREEZE OF DELRAY, A CONDOMINIUM, INC.

Current Principal Place of Business:

99 SEABREEZE AVE
APT. 2
DELRAY BEACH, FL 33483 US

New Principal Place of Business:

Current Mailing Address:

99 SEABREEZE AVE
APT. 2
DELRAY BEACH, FL 33483 US

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

GRIGORIAN, CHARLES S.
99 SEABREEZE AVE
APT. 2
DELRAY BEACH, FL 33483 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: PTS
Name: GRIGORIAN, CHARLES S
Address: 99 SEABREEZE AVE. APT. 2
City-St-Zip: DELRAY BEACH, FL 33483

Title: D
Name: VALENTI, KAREN
Address: 176 BEERS RD
City-St-Zip: EASTON, CT 06612

Title: D
Name: VALENTI, PETER
Address: 176 BEERS RD
City-St-Zip: EASTON, CT 06612

Title: D
Name: GRIGORIAN, DONNA A
Address: 99 SEABREEZE AVE. APT 2
City-St-Zip: DELRAY BEACH, FL 33483

Title: D
Name: LUPINI, HEIDI
Address: 133 WHISPERING BROOK
City-St-Zip: KENSINGTON, CT 06037

Title: D
Name: LUPINI, STEPHEN V
Address: 133 WHISPERING BROOK
City-St-Zip: KENSINGTON, CT 06037

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: CHARLES S GRIGORIAN

P

01/09/2012

Electronic Signature of Signing Officer or Director

_____ Date