2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24508

Apr 27, 2009 Secretary of State

Entity Name: SEASIDE VILLAS CONDOMINIUM ASSOCIATION, INC. (FISHER ISLAND)

Current Principal Place of Business: New Principal Place of Business:

41221 FISHER ISLAND DR. 41213 FISHER ISLAND DR. C/O AKAM -ONSITE C/O AKAM -ONSITE MIAMI BEACH, FL 33109 MIAMI BEACH, FL 33109

Current Mailing Address: New Mailing Address:

41221 FISHER ISLAND DR. 41213 FISHER ISLAND DR. C/O AKAM -ONSITE C/O AKAM -ONSITE MIAMI BEACH, FL 33109 MIAMI BEACH, FL 33109

FEI Number: 65-0052652 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HYMAN, SPECTOR & MARS LLP HYMAN, MICHAEL 150 WEST FLAGLER STREET 150 WEST FLAGLER STREET 27TH FLOOR - MICHAEL HYMAN ATTORNEY 27TH FLOOR - MICHAEL HYMAN ATTORNEY MIAMI, FL 33130 US MIAMI, FL 33130 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: MICHAEL HYMAN 04/27/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition RIMM, HARRY PADIAL, JUAN CARLOS Name: Name: 41222 FISHER ISLAND DRIVE / STOLADI Address: 41213 FISHER ISLAND DRIVE / AKAM Address:

City-St-Zip: FISHER ISLAND, FL 33109 City-St-Zip: FISHER ISLAND, FL 33109

Title: SD Title: SD (X) Change () Addition () Delete

PADIAL, JUAN CARLOS Name: NEFF, JAMES Name:

Address: 41222 FISHER ISLAND DRIVE / STOLADI Address: 41213 FISHER ISLAND DRIVE / AKAM

City-St-Zip: FISHER ISLAND, FL 33109 City-St-Zip: FISHER ISLAND, FL 33109

Title: TD () Delete Title: (X) Change () Addition JAMES, NEFF Name: BLUNTZER, CHRISTOPHER Name: 41222 FISHER ISLAND DRIVE / STOLADI 41213 FISHER ISLAND DRIVE / AKAM Address: Address:

City-St-Zip: FISHER ISLAND, FL 33109 City-St-Zip: FISHER ISLAND, FL 33109

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: JUAN CARLOS PADIAL PD 04/27/2009