

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26860

FILED
Apr 14, 2009
Secretary of State

Entity Name: THE SEABURY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

RESORT MANAGEMENT
834 BALD EAGLE DR.
MARCO ISLAND, FL 34145 US

New Principal Place of Business:

1060 SWALLOW AVENUE
MARCO ISLAND, FL 34145 US

Current Mailing Address:

RESORT MANAGEMENT
834 BALD EAGLE DR.
MARCO ISLAND, FL 34145 US

New Mailing Address:

FEI Number: 65-0126869 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MARTIN, KEITH
3243 ADAMS ST.
SARASOTA, FL 34241 US

Name and Address of New Registered Agent:

YACONO, RICK
834 BALD EAGLE DRIVE
MARCO ISLAND, FL 34145 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: RICK YACONO

04/14/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: HORN, HOWARD
Address: 187 BEAVER DAM RD
City-St-Zip: BROOKHAVEN, NY 11719

Title: VPD () Delete
Name: STUCKER, BILL
Address: P.O. BOX 770152
City-St-Zip: STEAMBOAT SPRINGS, CO 80477

Title: P () Delete
Name: GAMBLE, JOHN
Address: 1507 BERMUDA RD
City-St-Zip: MARCO ISLAND, FL 34145

Title: S () Delete
Name: ZERBO, ANGELO
Address: 34067 GRAND RIVER AVE
City-St-Zip: FARMINGTON, MI 48335

Title: () Delete
Name:
Address:
City-St-Zip:

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:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: KINNEY, STEPHEN
Address: 79 AGRESS ROAD
City-St-Zip: PERRINEVILLE, NJ 08535

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: JOHN GAMBLE

P

04/14/2009

Electronic Signature of Signing Officer or Director

Date