

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27303

FILED
Mar 24, 2009
Secretary of State

Entity Name: SEA OAKS LAKESIDE VILLAS "A" CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

8811 A1A
VERO BEACH, FL 32963

New Principal Place of Business:

Current Mailing Address:

8811 A1A
VERO BEACH, FL 32963

New Mailing Address:

FEI Number: 65-0069761

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAWSON, PAMELA
8811 A1A
VERO BEACH, FL 32963 US

Name and Address of New Registered Agent:

DAWSON, PAMELA S
8811 A1A
VERO BEACH, FL 32963 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: PAMELA S. DAWSON

03/24/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: ST () Delete
Name: HILTON, RAYMOND
Address: 8811 HWY A1A
City-St-Zip: VERO BEACH, FL 32963.

Title: P () Delete
Name: THOMAS, LYNN
Address: 8811 HWY A1A
City-St-Zip: VERO BEACH, FL 32963

Title: VP () Delete
Name: EVERETT, DONALD
Address: 8811 HWY A1A
City-St-Zip: VERO BEACH, FL 32963

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ST (X) Change () Addition
Name: HILTON, RAY
Address: 8811 HIGHWAY A1A
City-St-Zip: VERO BEACH, FL 32963.

Title: P (X) Change () Addition
Name: LYNN, THOMAS
Address: 8811 HWY A1A
City-St-Zip: VERO BEACH, FL 32963

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

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: TOM LYNN

P

03/24/2009

Electronic Signature of Signing Officer or Director

Date