2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2006
Secretary of State

DOCUMENT# N28604

Entity Name: SEASIDE SANCTUARY RESIDENTS ASSOCIATION, INC.

Current Principal Place of Business:

11902 RACE TRACK ROAD
TAMPA, FL 33626 US

New Principal Place of Business:

Current Mailing Address:

11902 RACE TRACK ROAD
TAMPA, FL 33626 US

New Mailing Address:

FEI Number: 59-2961951 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

THE PROPERTY GROUP OF CENTRAL FLORIDA, INC
11902 RACE TRACK ROAD
TAMPA, FL 33626 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: DP ( ) Delete
Name: MARTH, THOMAS
Address: PO BOX 375
City-St-Zip: CRYSTAL BEACH, FL 34681

Title: DS ( ) Delete
Name: MCCABE, PAT
Address: PO BOX 16
City-St-Zip: CRYSTAL BEACH, FL 34681

Title: DT ( ) Delete
Name: TULLIUS, JAMES
Address: PO BOX 1198
City-St-Zip: CRYSTAL BEACH, FL 34681

Title: D ( ) Delete
Name: ORMEROD, BONNIE
Address: PO BOX 308
City-St-Zip: CRYSTAL BEACH, FL 34681

Title: D ( ) Delete
Name: CALHOUN, DONALD
Address: PO BOX347
City-St-Zip: CRYSTAL BEACH, FL 34681

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition
Name: MCCABE, PAT
Address: PO BOX 16
City-St-Zip: CRYSTAL BEACH, FL 34681

Title: DT (X) Change ( ) Addition
Name: GLASS, COLLEEN
Address: PO BOX 174
City-St-Zip: CRYSTAL BEACH, FL 34681

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

Title: DS (X) Change ( ) Addition
Name: WATTS, RUTH
Address: PO BOX 613
City-St-Zip: CRYSTAL BEACH, FL 34681

I hereby certify that the information supplied with this filing does not qualify for the 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: THOMAS MARTH DP 04/13/2006

Electronic Signature of Signing Officer or Director — Date