

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28845

FILED  
Mar 06, 2009  
Secretary of State

**Entity Name:** SEASPRAY RECREATION ASSOCIATION, INC.

**Current Principal Place of Business:**

9600 S. OCEAN DRIVE  
JENSEN BEACH, FL 34957

**New Principal Place of Business:**

**Current Mailing Address:**

1111 SE FEDERAL HWY, STE 100  
STUART, FL 34994

**New Mailing Address:**

**FEI Number:** 59-2919891

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FORTE, LORRAINE H  
1111 SE FEDERAL HWY, STE 100  
STUART, FL 34994 US

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

KERT, LORRAINE H  
1111 SE FEDERAL HWY, STE 100  
STUART, FL 34994 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: LORRAINE H. KERT

03/06/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: BRION, JACQUES  
Address: 1860 N. CONGRESS AVE.  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: SD ( ) Delete  
Name: WILLIAMS, BRUCE  
Address: 9600 S OCEAN DR, #1108  
City-St-Zip: JENSEN BEACH, FL 34957

Title: D ( ) Delete  
Name: TARTAMELLA, JACK  
Address: 9600 S OCEAN DR #1005  
City-St-Zip: JENSEN BEACH, FL 34957

Title: D ( ) Delete  
Name: SCHWEIDER, LD  
Address: 9600 SOUTH OCEAN DR #309  
City-St-Zip: JENSEN BEACH, FL 34957

**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:

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: JACQUES BRION

PRES

03/06/2009

Electronic Signature of Signing Officer or Director

Date