


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007 8:00 am
Secretary of State

04-23-2007 90253 030 ****61.25

DOCUMENT # N47872

1. Entity Name
SEABREEZE SHORES NO. 1 CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
 SEA BREEZE COVE CIRCLE
 FORT MYERS, FL 33908

Mailing Address
 ISLAND MGMT
 P.O. BOX 100
 SANIBEL, FL 33957

2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country

40010014



01102007 Chg-NP CR2E037 (12/06)

4. FEI Number
65-0342065 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

MACKESY, STEVEN J
711 TARPON BAY RD
SANIBEL, FL 33957

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE P	<input checked="" type="checkbox"/> Delete BOGLARSKY, JACK 15171 SEA BREEZE COVE CIRCLE FORT MYERS, FL 33908	TITLE ND	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Eddy George 15141 Sea Breeze Cove Cir Fort Myers FL 33908
TITLE SD	<input checked="" type="checkbox"/> Delete SWAIN, ARTHUR 15163 SEA BREEZE COVE CR. FORT MYERS, FL 33908	TITLE D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition O'Keefe, Patrick 15161 Sea Breeze Cove Cir Fort Myers FL 33908
TITLE D	<input type="checkbox"/> Delete JOHNSON, ELMER 15143 SEA BREEZE COVE CIRCLE FORT MYERS, FL 33908	TITLE SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Swain, Coreta 15163 Sea Breeze Cove Cir Fort Myers FL 33908
TITLE VD	<input checked="" type="checkbox"/> Delete BRANAGAN, JANE 15161 SEA BREEZE COVE CIRCLE FORT MYERS, FL 33908	TITLE PDT	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE TD	<input type="checkbox"/> Delete KOHER, DONNA 15151 SEA BREEZE COVE CIRCLE FORT MYERS, FL 33908	TITLE PDT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME	<input type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Donna Kohler* **3/30/07** **239-432-5456**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #