## 2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED May 26, 2009 DOCUMENT# N50110 Secretary of State

Entity Name: SEAWATCH NEIGHBORHOOD ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

80 SEAWATCH DR 44 SEAWATCH DR

SEAGROVE BCH, FL 32459 SEAGROVE BCH, FL 32459

**Current Mailing Address: New Mailing Address:** 

80 SEAWATCH DR 44 SEAWATCH DR

SEAGROVE BCH, FL 32459 SEAGROVE BCH, FL 32459

FEI Number: 59-3131811 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

WRIGHT, WILLIAM E CROMMELIN, HARRIET 80 SEA WATCH DR 44 SEAWATCH DR

SEAGROVE BEACH, FL 32459 SEAGROVE BEACH, FL 32459 US 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: HARRIET CROMMELIN 05/26/2009

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete () Change () Addition

PATERSON, CHARLES B Name: Name: 2611 FERNWAY DR Address: Address: City-St-Zip: MONTGOMERY, AL 36111 City-St-Zip:

Title: () Delete Title: () Change () Addition

PATERSON, EVELYN A Name: Name: Address: 2611 FERNWAY DRIVE Address: City-St-Zip: MONTGOMERY, AL 36111 City-St-Zip:

Title: () Delete Title: () Change () Addition

WRIGHT, WILLIAM E. Name: Name: 80 SEAWATCH DR Address: Address: SEAGROVE BEACH, FL 32459 City-St-Zip: City-St-Zip:

( ) Delete Title: Title: () Change () Addition

Name: CROMMELIN, HARRIETT Name: Address: 44 SEAWATCH DR Address: City-St-Zip: SEAGROVE BEACH, FL 32459 City-St-Zip:

Title: () Delete Title: () Change () Addition

BUTLER, KENT Name: Name: 6935 HILLTOP COURT Address: Address: City-St-Zip: COLUMBUS, GA 31904 City-St-Zip:

Title: () Delete Title: () Change () Addition

FRAZER, NIM Name: Name: Address: 628 THORN PLACE Address: MONTGOMERY, AL 36106 City-St-Zip: 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: CHARLES B PATERSON ST 05/26/2009