

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 23, 2009
Secretary of State**

DOCUMENT# N93000000583

Entity Name: SEA VILLAS IV CONDOMINIUM ASSOCIATION OF NEW SMYRNA BEACH, INC.

Current Principal Place of Business:

3208 HILL STREET, #111
NEW SMYRNA BEACH, FL 32169 US

New Principal Place of Business:

Current Mailing Address:

3208 HILL STREET, #111
NEW SMYRNA BEACH, FL 32169 US

New Mailing Address:

FEI Number: 59-3168788 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FAIRCHILD MOSS MANAGEMENT, LLC
1600 S. FEDERAL HWY.
SUITE 970
POMPANO BEACH, FL 33062 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: VPD () Delete
Name: DYER, PAUL
Address: N9170 CR Q
City-St-Zip: DOWNING, WI 54734

Title: STD () Delete
Name: MACEACHERN, LORAINÉ
Address: 1056 UTICA LANE
City-St-Zip: ANGELS CAMP, CA 95222

Title: PD () Delete
Name: CAIN, RALPH
Address: 423 CAROLYN DRIVE
City-St-Zip: OVIEDO, FL 32765

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: DYER, PAUL
Address: 3208 HILL ST., #111
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: STD (X) Change () Addition
Name: MACEACHERN, LORAINÉ
Address: 3208 HILL ST., #111
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: PD (X) Change () Addition
Name: CAIN, RALPH
Address: 3208 HILL ST., #111
City-St-Zip: NEW SMYRNA BEACH, FL 32169

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: JOHN GILBERT

Electronic Signature of Signing Officer or Director

MGR

03/23/2009

Date