

**2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Sep 02, 2005**  
**Secretary of State**

DOCUMENT# N93000004190

**Entity Name:** SOUTHEASTERN SAILING INDUSTRIES ASSOCIATION, INC.**Current Principal Place of Business:**1648 S. LAKESHORE DR.  
SARASOTA, FL 34231**New Principal Place of Business:****Current Mailing Address:**PO BOX 382  
ST PETERSBURG, FL 33731**New Mailing Address:****FEI Number:** 59-3230931**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**FRISOSKY, RON  
1648 SOUTH LAKESHORE DR.  
SARASOTA, FL 34231 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:** PD ( ) Delete  
**Name:** FRISOSKY, RONALD  
**Address:** 1648 SOUTH LAKESHORE DR  
**City-St-Zip:** SARASOTA, FL 34231**Title:** VPD ( ) Delete  
**Name:** MASSEY, EDWARD  
**Address:** 1015 RIVERSIDE DR  
**City-St-Zip:** PALMETTO, FL 34221**Title:** ( ) Delete  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Delete  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Delete  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Delete  
**Name:**  
**Address:**  
**City-St-Zip:****ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** TRES ( ) Change (X) Addition  
**Name:** MORRELL, STEVE  
**Address:** 6610 1ST AVE WEST  
**City-St-Zip:** BRADENTON, FL 34209**Title:** DIR ( ) Change (X) Addition  
**Name:** HAWKINS, SCOTT  
**Address:** 850 AQUIDNECK AVE UNIT B  
**City-St-Zip:** MIDDLETOWN, RI 02842**Title:** DIR ( ) Change (X) Addition  
**Name:** RUNDA, TOM  
**Address:** 1717 MASSACHUSETTS AVE N.E.  
**City-St-Zip:** ST PETERSBURG, FL 33703**Title:** DIR ( ) Change (X) Addition  
**Name:** CASEY, TOM  
**Address:** 4585 LONG LEAF LANE  
**City-St-Zip:** SARASOTA, FL 34241

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RONALD J FRISOSKY

PD

09/02/2005

Electronic Signature of Signing Officer or Director

Date