FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 20 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9300004737 (3)

THE SEABREEZE AT MELBOURNE BEACH HOMEOWNERS' ASS OCIATION, INC.

OCIATI	ON, INC.				
Principal Place of Business		Mailing Address			
166 SEAVIEW ST. MELBOURNE BEACH FL 32951		P.O. BOX 510644 MELBOURNE BEACH FL 32951-0644 US			
				3. Date Incorporated or Qualified 10/14/1993	3a. Date of Last Report 04/12/1996
21	lace of Business	2e. Mailing Addross 26		4. FEI Number 59-3204616	Applied For Not Applicable
Suite, Apt.		Suite, Apt. #, etc.	:	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip 29	Oountry 30		Yes No
	9. Name and Address of Currer	nt Registered Agent	···	10. Name and Address of New Re	gistered Agent
GRAY, IRENE C 171 SEAVIEW ST MELBOURNE BCH FL 32951			B1 Name B2 Street A	oddress (P.O. Box Number is Not Acceptab	ole)
			В3	83	
			. 84 City		FL 85 Zip Code
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.					
-	TRAVE C. C.C.A.	ations of Section 017.0005,	riolida statujes.		5/2/07
SIGNATURE _	Signature, typed or printed name of register diag-	ent and little if applicable (N	IOTE Registered Agent signature r	required when rainstaling)	7/2/7/
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TITLE	PD .	Change Addition
NAME	YANDELL, DOREEN	•	1.2 NAME	catherine Casaro	·la
STREET ADDRESS	231 SEAVIEW ST			166 Scaview ST	
CITY-ST-ZIP	MELBOURNE BCH FL		1.4 CITY-ST-ZIP	melbourne Boh, Fl 32	951
TITLE	VD	DELETE	2.1 TITLE	VD	Change Addition
NAME	COLLINS, PATRICIA	•	2.2 NAME	Ed Dowsell	
STREET ADDRESS	182 SEAVIEW ST		2.3 STREET ADDRESS	235 Seaview ST	
CHY-ST-ZIP	MELBOURNE BCH FL		2.4 CITY-ST-ZIP	melbourne Beh Fl	32951
TITLE	SD	DELETE		TO	Change Addition
NAME	GRAY, IRENE C.			IRENE C. GRAY	
STREET ADDRESS	171 SEAVIEW ST			171 Seaview STC	
CITY-ST-ZIP	MELBOURNE BEACH FL			melbourne Beh Fi	1 32951
TALE		DELETE	4.1 711LE	> <i>b</i>	☐ Change ☒ Addition
NAME			4. P. NAME	anne Sisler	•
STREET ADDRESS			4.3 STREET ADDRESS	167 Seaview ST	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	Melbourne Beh Fl	32951
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME	•		5.2 NAME		
STREET ADDRESS	•		5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6 Ż NAME		
STREET ADDRESS			6 \$ STREET ADDRESS		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on appatiant with an address.