2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005048

FILED Mar 11, 2009 Secretary of State

Entity Name: SEA PLACE III HOMEOWNERS ASSOCIATION, INC.

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

5455 AIA SOUTH

ST AUGUSTINE, FL 32080 US ST AUGUSTINE, FL 32080 US

Current Mailing Address: New Mailing Address:

5455 AIA S 5455 AIA SOUTH

ST AUGUSTINE, FL 32080 US ST AUGUSTINE, FL 32080 US

FEI Number: 59-3194355 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:

MAY MANAGEMENT SERVICES INC. 5455 A1A SOUTH ST AUGUSTINE, FL 32080

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

HENRY, MARIE F HEANEY, MARIE F Name: Name: 128 TIDE WRATH DR Address: 5455 A1A SOUTH Address:

City-St-Zip: SAINT AUGUSTINE, FL 32080 City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: () Delete Title: (X) Change () Addition WILLIAMS, THOMAS Name: WILLIAMS, THOMAS Name:

Address: 1772 S FAIR DRIVE Address: 5455 A1A SOUTH City-St-Zip: SAINT AUGUSTINE, FL 32080 City-St-Zip: SAINT AUGUSTINE, FL 32080

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

BEDARD, ARTHUR BEDARD, ARTHUR Name: Name: 1776 SEAFAIR DR Address: Address: 5455 A1A SOUTH

City-St-Zip: SAINT AUGUSTINE, FL 32080 City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: () Delete Title: (X) Change () Addition Name: THULL, ELSIE Name: THULL, ELSIE

Address: 1756 SEAFAIR DR Address: 5455 A1A SOUTH SAINT AUGUSTINE, FL 32080 City-St-Zip: City-St-Zip: SAINT AUGUSTINE, FL 32080

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

SCHMIDT, CAL LAPIERRE, GARY Name: Name: 1785 SEAFAIR DRIVE 5455 A1A SOUTH Address: Address:

SAINT AUGUSTINE, FL 32080 SAINT AUGUSTINE, FL 32080 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: MARIE F. HEANEY Ρ 03/11/2009