## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N94000003778

FILED Jan 07, 2009 Secretary of State

Entity Name: SEA CHASE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 9577 GULF SHORE DRIVE NAPLES, FL 34108 **Current Mailing Address: New Mailing Address:** 9577 GULF SHORE DRIVE NAPLES, FL 34108 FEI Number: 65-0506814 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: BECKER & POLIAKOFF, P.A. ATTN: JOSEPH ADAMS 999 VANDERBILT BEACH RD. SUITE 501 NAPLES, FL 34108 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition ALLEN, T. LEWIS ALLEN, T. LEWIS Name: Name: 117 CASTLE RIDGE DR Address: 568 ORCHARD RD. Address: City-St-Zip: BATTLE CREEK, MI 49015 City-St-Zip: MARSHALL, MI 49068 Title: ( ) Delete Title: (X) Change ( ) Addition READENOK, RANDY Name: REMDENOK, RANDY Name: Address: 3609 VINEYARD SPRING COURT Address: 3609 VINEYARD SPRING COURT City-St-Zip: ROCHESTER HILLS, MI 48306 City-St-Zip: ROCHESTER HILLS, MI 48306 Title: VPD () Delete Title: () Change () Addition DIEPEN, SCOTT H Name: Name: 8885 CEDAR LAKE DRIVE Address: Address: City-St-Zip: JENISON, MI 49428 City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: SMITH, ROBERT Name: 9577 GULF SHORE DRIVE #801 Address: Address: City-St-Zip: NAPLES, FL 34108 City-St-Zip: Title: () Delete Title: () Change () Addition BROWN, TERENCE Name: Name: P.O. BOX 410 Address: Address: City-St-Zip: EDWARDS, CO 81632 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: JAMES MADSEN MGR 01/07/2009