


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 08, 2006 8:00 am
Secretary of State

05-08-2006 90277 006 ****61.25

DOCUMENT # N95000004840					
1. Entity Name SEASCAPE NUMBER 9-A ASSOCIATION, INC.					
Principal Place of Business 100 SEASCAPE DRIVE DESTIN, FL 32541			Mailing Address P.O. BOX 1666 DESTIN, FL 32540		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-3347719	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
JOHNSON MAITREJEAN, WAVERLY (restore maiden name) GULF COAST RENTALS & MGMT. 910 AIRPORT RD. STE. A-5 DESTIN, FL 32541			Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u>Waverly Johnson</u>		DATE <u>4/28/06</u>		(NOTE: Registered Agent signature required when reinstating)	
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SHULL, EDWARD 1230 HARTSHORE CLOSE CUMMING, GA 30041	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST CORRIE, ELIZABETH 1227 BUCK ISLAND DR GUNTERVILLE, AL 359768394	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KELLY, TERRENCE 272 HIDDEN LAKE ROED HENDERSONVILLE, TN 37075	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Dickerson, Richard 5323 Lancelot Rd Brentwood, Tn 37027	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Kelly, Terrence 825 Plantation Blvd. Gallatin, Tn. 37066-4497	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Dickerson, Richard 5323 Lancelot Rd Brentwood, Tn 37027	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Kelly, Terrence 825 Plantation Blvd. Gallatin, Tn. 37066-4497	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Terrence M Kelly</u>		SIGNATURE: <u>Terrence M Kelly</u>		DATE: <u>4/23/06</u>	
(615) 451-2558		Daytime Phone #			