

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000628

FILED
May 31, 2007
Secretary of State

Entity Name: SEYCHELLES COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

108 SEYCHELLES COURT
ST AUGUSTINE, FL 32080

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2210
ST. AUGUSTINE, FL 320852210 US

New Mailing Address:

FEI Number: 59-3391319 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BAMBERG, JONATHAN B
109 SEYCHELLES COURT
ST. AUGUSTINE, FL 32080 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:

Title: D () Delete
Name: JONATHAN, BAMBERG B
Address: 109 SEYCHELLES COURT
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: DST () Delete
Name: MIANI, DONNA
Address: 112 SEYCHELLES COURT
City-St-Zip: ST AUGUSTINE, FL 32080

Title: PD () Delete
Name: PETERS, JAMES J
Address: 108 SEYCHELLES COURT
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: D () Delete
Name: HARDY, BEVERLY
Address: 117 SEYCHELLES COURT
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: VD (X) Delete
Name: GRESHAM, ELISE
Address: 120 SEYCHELLES COURT
City-St-Zip: SAINT AUGUSTINE, FL 32080

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: JONATHAN B. BAMBERG

D

05/31/2007

Electronic Signature of Signing Officer or Director

Date