

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001635

FILED
Apr 01, 2009
Secretary of State

Entity Name: SHEFFIELD A CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2SHEFFIELD A
WEST PALM BEACH, FL 334171503

New Principal Place of Business:

19 SHEFFIELD A
WEST PALM BEACH, FL 33417 US

Current Mailing Address:

SEACREST SERVICES, INC.
2400 CENTRE PARK W. DRIVE, #175
WEST PALM BEACH, FL 33409

New Mailing Address:

SEACREST SERVICES INC
2400 CENTREPARK W DR #175
WEST PALM BEACH, FL 33409 US

FEI Number: 59-2364067

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORT, RUTH
14 SHEFFIELD A
WEST PALM BEACH, FL 33417 US

Name and Address of New Registered Agent:

CORT, MICHAEL
14 SHEFFIELD A
WEST PALM BEACH, FL 33417 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: MICHAEL CORT

04/01/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: CORT, RUTH
Address: 14 SHEFFIELD A
City-St-Zip: WEST PALM BEACH, FL 33417

Title: V () Delete
Name: VIGNOLA, EDWARD
Address: 7 SHEFFIELD A
City-St-Zip: WEST PALM BEACH, FL 33417

Title: S () Delete
Name: CORT, MICHAEL
Address: 14 SHEFFIELD A
City-St-Zip: WEST PALM BEACH, FL 33417

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: CORT, RUTH
Address: 14 SHEFFIELD A
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: VP (X) Change () Addition
Name: HALE, RON
Address: 18 SHEFFIELD A
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: D (X) Change () Addition
Name: VIGNOLA, EDWARD
Address: 7 SHEFFIELD A
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: P () Change (X) Addition
Name: ANDERSON, DONNA
Address: 19 SHEFFIELD A
City-St-Zip: WEST PALM BEACH, FL 33417 US

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: GALE CORONA

MS

04/01/2009

Electronic Signature of Signing Officer or Director

Date