

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003512

FILED
Mar 24, 2012
Secretary of State

Entity Name: SEAWINDS CONDOMINIUM ASSOCIATION OF ORMOND BEACH, INC.

Current Principal Place of Business:

1183 OCEAN SHORE BLVD
#103
ORMOND BEACH, FL 32176

New Principal Place of Business:

Current Mailing Address:

1183 OCEAN SHORE BLVD
#103
ORMOND BEACH, FL 32176

New Mailing Address:

FEI Number: 59-3411164

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALBANESE HOLLANDER, INC.
506 CHERRYWOOD DRIVE
ORMOND BEACH, FL 32174 US

Name and Address of New Registered Agent:

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: VP
Name: GRAHAM, DARYL
Address: 1183 OCEAN SHORE BLVD #902
City-St-Zip: ORMOND BEACH, FL 32176

Title: D
Name: ULBRICH, GREG
Address: 1183 OCEAN SHORE BLVD #405
City-St-Zip: ORMOND BEACH, FL 32176

Title: T
Name: SCHILAWSKI, SHERIDAN
Address: 1183 OCEAN SHORE BLVD #502
City-St-Zip: ORMOND BEACH, FL 32176

Title: S
Name: TEMPESTA, ANTHONY
Address: 1183 OCEAN SHORE BLVD #303
City-St-Zip: ORMOND BEACH, FL 32176

Title: P
Name: TAGGERT, RICK
Address: 1183 OCEAN SHORE BLVD #802
City-St-Zip: ORMOND BEACH, FL 32176

I hereby 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 all other like empowered.

SIGNATURE: ADRIANA HOLLANDER

MGR

03/24/2012

Electronic Signature of Signing Officer or Director

Date