


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 09, 2008 8:00 am**  
**Secretary of State**

04-09-2008 90035 044 \*\*\*\*61.25

<b>DOCUMENT # N97000004622</b>					
<b>1. Entity Name</b> JEANIE BY THE SEA CONDOMINIUM ASSOCIATION, INC.					
<b>Principal Place of Business</b> SCPM YLER AVENUE 645 CLASSIC COURT #104 MELBOURNE, FL 32940 US			<b>Mailing Address</b> SCPM YLER AVENUE 645 CLASSIC COURT #104 MELBOURNE, FL 32940 US		
<b>2. Principal Place of Business - No P.O. Box #</b> 404 Tyler Avenue		<b>3. Mailing Address</b> P.O. Box 190			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
<b>City &amp; State</b> Cape Canaveral, Fl.		<b>City &amp; State</b> Cape Canaveral, Fl.		<b>4. FEI Number</b> 59-2582286	
<b>Zip</b> 32920		<b>Country</b>		<b>Applied For</b> Not Applicable	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>			
<b>6. Name and Address of Current Registered Agent</b> SPACE COAST PROPERTY MANAGEMENT OF BREVARD 645 CLASSIC COURT #104 MELBOURNE, FL 32940			<b>7. Name and Address of New Registered Agent</b> Florida Coast Management, Inc. Street Address (P.O. Box Number is Not Acceptable) 7028 Sevilla Ct. #504 City: Cape Canaveral FL Zip Code: 32920		
<b>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.</b> SIGNATURE: <u>Deborah Carroll, Deborah Carroll, Property Manager</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2008</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CARROLL, DEBORAH G <input checked="" type="checkbox"/> Delete 7028 SEVILLA CT #504 CAPE CANAVERAL, FL 32920				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CARDARELLI, DIANE <input type="checkbox"/> Delete 1058 LUNDY COURT WINTER PARK, FL 32792				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Craig, Larry 908 Lagoon Drive Oviedo, Fl. 32765				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Carroll, Edward D 7028 Sevilla Ct #504 Cape Canaveral, Fl. 32920				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
<b>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 empowerers.</b>					
<b>SIGNATURE:</b> <u>Edward D. Carroll</u> <b>4/6/08 954-242-9075</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					