2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2006
Secretary of State

DOCUMENT# N97000006692

Entity Name: SEASIDE AT BELLEAIR III CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

THREE SEASIDE LN
CLEARWATER, FL 33765

New Principal Place of Business:

Current Mailing Address:

7300 PARK ST
SEMINOLE, FL 337774601

New Mailing Address:

FEI Number: 59-3492236 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

REINHARDT, DEBRA
7300 PARK ST
SEMINOLE, FL 337774601 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: TD ( ) Delete
Name: LANKTON, JAMES
Address: THREE SEASIDE LANE, #402
City-St-Zip: BELLEAIR, FL 33756

Title: VPD ( ) Delete
Name: GEIGER, JAMES
Address: THREE SEASIDE LANE #202
City-St-Zip: BELLEAIR, FL 33756

Title: PD ( ) Delete
Name: RAYMOND HERMRA, V.
Address: 3 SEASIDE LANE # 102
City-St-Zip: BELLAIR, FL 33756

Title: SD ( ) Delete
Name: KENNEY, JACK
Address: 3 SEASIDE LANE # 702
City-St-Zip: BELLEAIR, FL 33756

Title: D (X) Delete
Name: THOMAS, FRED
Address: 3 SEASIDE LANE #601
City-St-Zip: BELLAIR, FL 33756

Title: D (X) Delete
Name: SEATON, DON
Address: 3 SEASIDE LANE # 101
City-St-Zip: BELLAIR, FL 33756

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: THOMAS, FRED
Address: THREE SEASIDE LANE, #601
City-St-Zip: BELLEAIR, FL 33756

Title: S (X) Change ( ) Addition
Name: GEIGER, JAMES
Address: THREE SEASIDE LANE #202
City-St-Zip: BELLEAIR, FL 33756

Title: T (X) Change ( ) Addition
Name: PIERCE, LORRAINE
Address: 3 SEASIDE LANE # 201
City-St-Zip: BELLAIR, FL 33756

Title: VP (X) Change ( ) Addition
Name: WHITE, ROZ
Address: 3 SEASIDE LANE # 501
City-St-Zip: BELLEAIR, FL 33756

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 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: LINDA E. KISER MGR. 04/10/2006

Electronic Signature of Signing Officer or Director — Date