2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001969

FILED Apr 27, 2005 Secretary of State

Entity Name: SEAGROVE BY THE SEA COMMUNITY ASSOCIATION, INC.

urrent Pri	ncipal Place	of Business:	New Principal Place	of Business:	
	ITY HWY 30-4 SA BEACH, F				
urrent Mai	iling Addres	s:	New Mailing Addres	s:	
O BOX 70	E & BLUE, P.A) ITY, FL 32402				
El Number: 5	59-3666867	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
21 MCKEN		1 US			
	IZIE AVE ITY, FL 3240 named entity s		ourpose of changing its registere	ed office or registered agent, or both	
21 MCKEN ANAMA CI he above n	IZIE AVE ITY, FL 3240 [.] named entity s of Florida. E:	ubmits this statement for the p			
21 MCKEN ANAMA CI The above note the State of St	IZIE AVE ITY, FL 3240 ^o named entity s of Florida. E:	submits this statement for the particles in the particles in Signature of Registered Agr	ent	Date	
21 MCKEN ANAMA CI The above note the State of St	IZIE AVE ITY, FL 3240 [.] named entity s of Florida. E:	submits this statement for the particles in the particles in Signature of Registered Agr	ent ADDITIONS/CHANG		
21 MCKEN ANAMA CI The above not the State of SIGNATURE DEFICERS of the state of th	IZIE AVE ITY, FL 3240 named entity s of Florida. E: Electron AND DIRECTOR	submits this statement for the particles of Registered Agricological Forms:	ent ADDITIONS/CHANG	Date	
21 MCKEN ANAMA CI The above not the State of GIGNATURE PFFICERS title: ame:	IZIE AVE ITY, FL 3240 named entity s of Florida. E: Electron AND DIRECTOR PD () MCCONAUGHE	submits this statement for the partic Signature of Registered Agr FORS: Delete Y, WARNER	ent ADDITIONS/CHANG Title: Name:	Date ES TO OFFICERS AND DIRECTO	
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I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: WARNER MCCONAUGHEY PD 04/27/2005