


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2007 8:00 am
Secretary of State

04-09-2007 90065 012 ****61.25

DOCUMENT # N99000000406 1. Entity Name SEA MIST COURT OWNERS ASSOCIATION, INC.					
Principal Place of Business 3355 OCEAN DRIVE VERO BEACH, FL 32963			Mailing Address 3355 OCEAN DRIVE VERO BEACH, FL 32963		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-3576407	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
NECESSARY, DOUG 2151 SEA MIST CT VERO BEACH, FL 32963				Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE OT <input checked="" type="checkbox"/> Delete	NAME SENNE, RACHEL		TITLE OT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME BUNGER, MARY LOU	
STREET ADDRESS 2150 SEA MIST CT	CITY-ST-ZIP VERO BEACH, FL 32963		STREET ADDRESS 2136 SEA MIST COURT	CITY-ST-ZIP VERO BEACH, FL 32963	
TITLE P <input type="checkbox"/> Delete	NAME NECESSARY, DOUGLAS		TITLE N. DOUGLAS H. <input type="checkbox"/> Change <input type="checkbox"/> Addition	STREET ADDRESS 2151 SEA MIST CRT	
STREET ADDRESS VERO BEACH, FL 32963	CITY-ST-ZIP VERO BEACH, FL 32963		CITY-ST-ZIP V/S <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	STREET ADDRESS 	
TITLE S <input type="checkbox"/> Delete	NAME CONROY, JOHN WILLIAM		TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME 	
STREET ADDRESS 2161 SEA MIST COURT	CITY-ST-ZIP VERO BEACH, FL 32963		STREET ADDRESS 	CITY-ST-ZIP 	
TITLE <input type="checkbox"/> Delete	NAME 		TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME 	
STREET ADDRESS 	CITY-ST-ZIP 		STREET ADDRESS 	CITY-ST-ZIP 	
TITLE <input type="checkbox"/> Delete	NAME 		TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME 	
STREET ADDRESS 	CITY-ST-ZIP 		STREET ADDRESS 	CITY-ST-ZIP 	
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 empowered.					
SIGNATURE: <i>Douglas H Necessary</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			4/2/07 Date		
772 234 1639 Daytime Phone #					