

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000095330

**FILED**  
**Jan 23, 2012**  
**Secretary of State**

**Entity Name:** SEA BREEZE COMMUNITY MANAGEMENT SERVICES, INC.

**Current Principal Place of Business:**

8259 N MILITARY TRAIL  
SUITE #11  
PALM BEACH GARDENS, FL 33410 US

**New Principal Place of Business:**

4227 NORTHLAKE BOULEVARD  
PALM BEACH GARDENS, FL 33410 US

**Current Mailing Address:**

8259 N MILITARY TRAIL  
SUITE #11  
PALM BEACH GARDENS, FL 33410 US

**New Mailing Address:**

4227 NORTHLAKE BOULEVARD  
PALM BEACH GARDENS, FL 33410 US

**FEI Number:** 65-1143294

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

JAMASON, BEVERLEY T  
8259 N MILITARY TRAIL  
SUITE #11  
PALM BEACH GARDENS, FL 33410 US

**Name and Address of New Registered Agent:**

JAMASON, BEVERLEY T  
4227 NORTHLAKE BOULEVARD  
PALM BEACH GARDENS, FL 33410 US

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:

01/23/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P/T  
Name: JAMASON, BEVERLEY T  
Address: 4227 NORTHLAKE BOULEVARD  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: SVP  
Name: JAMASON, BEVERLEY T  
Address: 4227 NORTHLAKE BOULEVARD  
City-St-Zip: PALM BEACH GARDENS, FL 33410

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BEVERLEY JAMASON

PRES

01/23/2012

Electronic Signature of Signing Officer or Director

Date