

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000068593

FILED
Apr 29, 2008
Secretary of State

Entity Name: SEA COAST GARDENS 2 RENTAL CORPORATION, INC.

Current Principal Place of Business:

4151 SOUTH ATLANTIC AVENUE
NEW SMYRNA BEACH, FL 32169

New Principal Place of Business:

Current Mailing Address:

4151 SOUTH ATLANTIC AVENUE
NEW SMYRNA BEACH, FL 32169

New Mailing Address:

FEI Number: 26-0377752

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LONNIE, EVERETT
4151 SOUTH ATLANTIC AVENUE
NEW SMYRNA BEACH, FL 32169 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DST () Delete
Name: GARDNER, HERB
Address: 4314 GULL COVE
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: DV () Delete
Name: GRANSTROM, BOB
Address: 6941 SO. ATLANTIC AVE
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: DP () Delete
Name: BLOUNT, EVELYN L
Address: 4151 SO. ATLANTIC AVE, UNIT 512
City-St-Zip: NEW SMYRNA BEACH, FL 32169

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: BLOUNT, EVELYN
Address: 4151 S ATLANTIC AVE, #512
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DST (X) Change () Addition
Name: GARDNER, HERBERT L
Address: 4314 GULL COVE
City-St-Zip: NEW SMYRNA BEACH, FL 32169

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EVELYN BLOUNT

DP

04/29/2008

Electronic Signature of Signing Officer or Director

Date