

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25656

Entity Name: SEA ISLAND NORTH CONDOMINIUM III, INC.**Current Principal Place of Business:**MONARCH ASSOCIATION MANAGEMENT, INC.
500 ALTERNATE 19 SOUTH
PALM HARBOR, FL 34683**Current Mailing Address:**MONARCH ASSOCIATION MANAGEMENT, INC.
500 ALTERNATE 19 SOUTH
PALM HARBOR, FL 34683 US**FEI Number:** 59-2096526**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MONARCH ASSOCIATION MANAGEMENT, INC.
MONARCH ASSOCIATION MANAGEMENT, INC.
500 ALTERNATE 19 SOUTH
PALM HARBOR, FL 34683 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:** M. SUSASN MARINO

04/25/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name WINKLER, JEFF
Address MONARCH ASSOCIATION
 MANAGEMENT, INC.
 500 ALTERNATE 19 SOUTH
City-State-Zip: PALM HARBOR FL 34683

Title TREASURER
Name AKSTIN, CHARLES
Address MONARCH ASSOCIATION
 MANAGEMENT, INC.
 500 ALTERNATE 19 SOUTH
City-State-Zip: PALM HARBOR FL 34683

Title SECRETARY
Name LOVE, JOHNNY
Address MONARCH ASSOCIATION
 MANAGEMENT, INC.
 500 ALTERNATE 19 SOUTH
City-State-Zip: PALM HARBOR FL 34683

Title VPD
Name RAINFORTH, TOM
Address MONARCH ASSOCIATION
 MANAGEMENT, INC.
 500 ALTERNATE 19 SOUTH
City-State-Zip: PALM HARBOR FL 34683

Title DIRECTOR
Name PROCTOR, BOB
Address 2706 ALT. 19 NORTH
 SUITE 240A
City-State-Zip: PALM HARBOR FL 34683

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

SIGNATURE: JOHNNY LOVE**SECRETARY**

04/25/2017

Electronic Signature of Signing Officer/Director Detail

Date