

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 05, 2003 8:00 am
Secretary of State

02-05-2003 90129 002 ****61.25

DOCUMENT # N15991

1. Entity Name
SEASCAPE TOWERS CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**5207 SOUTH ATLANTIC AVE.
NEW SMYRNA BCH. FL 32169**

Mailing Address
**5207 SOUTH ATLANTIC AVE.
NEW SMYRNA BCH. FL 32169**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2709761**

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HURA, CAROLYN
5207 S. ATLANTIC AVE
NEW SMYRNA BCH. FL 32169**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

CAROLYN HURA - MANAGER

SIGNATURE: *Carolyn Hura (Registered Agent)*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution.

\$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

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TITLE	NAME	TITLE	NAME
PD	PREGMON, MICHAEL		
	1441 WINCHIME LANE		
	ORLANDO FL 32837		
VD	DRIBAN, STANLEY		
	5207 S ATLANTIC AVE UNIT 1021-NSB		
	NEW SMYRNA BEACH FL 32169		
SD	KTICHENS, JAMES		
	1670 CHOCTAW TRAIL		
	MAITLAND FL 32751		
TD	HARRIS, JERRY		
	1001 E AMELIA STREET		
	ORLANDO FL 32837		
D	HURST, SHELDON		
	3333 BELLEMEADE DRIVE		
	VALDOSTA GA 31605		

12. I hereby certify that the information supplied with this filing does not qualify 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 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: *Michael Pregon* **2/1/03 386-423-2305**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER

CR2E037 (10/02)