

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004454

**FILED**  
**Mar 25, 2010**  
**Secretary of State**

**Entity Name:** SEASCAPE NUMBER 7-C ASSOCIATION, INC.

**Current Principal Place of Business:**

100 SEASCAPE DR.  
DESTIN, FL 32550 US

**New Principal Place of Business:**

**Current Mailing Address:**

100 SEASCAPE DR.  
DESTIN, FL 32550 US

**New Mailing Address:**

**FEI Number:** 59-3196969

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LOGSDON, DIANE E  
100 SEASCAPE DR.  
DESTIN, FL 32550 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

**OFFICERS AND DIRECTORS:**

Title: DT  
Name: SIMON, CHARLIE  
Address: 608 BELLE TERRE CIR  
City-St-Zip: BIRMINGHAM, AL 35226

Title: DS  
Name: PATRICK, CARL L JR  
Address: 4423 GLEN CARY DR  
City-St-Zip: ATLANTA, GA 30342

Title: D  
Name: CAMBELL, HARVEY  
Address: .1212 COUNTRY CLUB CIRCLE  
City-St-Zip: HOOVER, AL 35244

Title: VDP  
Name: GAUNT, PAT  
Address: 100 SEASCOE DR VILLA 200  
City-St-Zip: DESTIN, FL 32550

Title: M  
Name: LOGSDON, DIANE E  
Address: 100 SEASCAPE DR.  
City-St-Zip: DESTIN, FL 32550

Title: D  
Name: MANSFIELD, EDDIE  
Address: 139 CAYMAN COVE  
City-St-Zip: DESTIN, FL 32541

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: DIANE E. LOGSDON

MANA

03/25/2010

Electronic Signature of Signing Officer or Director

Date