

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 717692

**Entity Name:** SEACREST TOWERS CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**1609 N. RIVERSIDE DR.  
POMPANO BEACH, FL 33062-3325**Current Mailing Address:**1609 N. RIVERSIDE DR.  
POMPANO BEACH, FL 33062-3325 US**FEI Number:** 59-1494622**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VANOVERBEKE, REUBEN  
1609 N. RIVERSIDE DR.  
APT. # 303  
POMPANO BEACH, FL 33062 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:** REUBEN VANOVERBEKE

01/16/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title AT-LARGE  
Name LEVINE, ANDREA  
Address 1609 N. RIVERSIDE DR.  
APT. #607  
City-State-Zip: POMPANO BEACH FL 33062

Title PRESIDENT  
Name VANOVERBEKE, REUBEN  
Address 1609 N. RIVERSIDE DR.  
APT. #303  
City-State-Zip: POMPANO BEACH FL 33062

Title TREASURER  
Name BEADNELL, BARBARA  
Address 1609 N. RIVERSIDE DR.  
APT. #1006  
City-State-Zip: POMPANO BEACH FL 33062

Title VP  
Name FARMER, WILLIAM  
Address 1609 N. RIVERSIDE DR.  
APT. #905  
City-State-Zip: POMPANO BEACH FL 33062

Title SECRETARY  
Name DELLA CORTE, JOHNA  
Address 1609 N. RIVERSIDE DR.  
APT. #302  
City-State-Zip: POMPANO BEACH FL 33062

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:** JOHNA DELLA CORTE

SECRETARY

01/16/2018

Electronic Signature of Signing Officer/Director Detail

Date