## 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 717692** 

Entity Name: SEACREST TOWERS CONDOMINIUM ASSOCIATION, INC.

**FILED** Jan 25, 2017 **Secretary of State** CC3539107869

01/25/2017

## **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

Date Electronic Signature of Registered Agent

City-State-Zip:

Officer/Director Detail:

City-State-Zip:

VΡ Title AT-LARGE Title

LEVINE. ANDREA Name Name FARMER, WILLIAM

Address 1609 N. RIVERSIDE DR. Address 1609 N. RIVERSIDE DR. APT. #607 APT. #905

POMPANO BEACH FL 33062 City-State-Zip: POMPANO BEACH FL 33062 City-State-Zip:

**PRESIDENT SECRETARY** Title Title

Name VANOVERBEKE, REUBEN Name DELLA CORTE, JOHNA

Address 1609 N. RIVERSIDE DR. Address 1609 N. RIVERSIDE DR.

APT. #303 APT. #302 POMPANO BEACH FL 33062

Title **TREASURER** Name BEADNELL, BARBARA

1609 N. RIVERSIDE DR. Address

APT. #1006

POMPANO BEACH FL 33062 City-State-Zip:

POMPANO BEACH FL 33602

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** 

01/25/2017