### **2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# 728053** 

Entity Name: SEASPRAY CONDOMINUM ASSOCIATION, INC.

**FILED** Jan 24, 2023 **Secretary of State** 1244293413CC

## **Current Principal Place of Business:**

1530 MIRACLE STRIP PKWY, SE FORT WALTON BEACH, FL 32548

## **Current Mailing Address:**

1530 MIRACLE STRIP PKWY, SE FORT WALTON BEACH. FL 32548 US

FEI Number: 59-1895220 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

MCMILLAN, ELISE 1530 MIRACLE STRIP PKWY, SE **OFFICE** FORT WALTON BEACH, FL 32548 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: ELISE MCMILLAN, GM 01/24/2023

> Date Electronic Signature of Registered Agent

#### Officer/Director Detail:

Title **TREASURER** Title **SECRETARY** 

Name BRADSHAW, WAYNE Name DEZZUTTO, GILLIAN

Address 900 EAST SAWGRASS TRAIL Address 8051 CHIPPER TREE CIRCLE City-State-Zip: ANCHORAGE AK 99507-3300 City-State-Zip: DAKOTA DUNES SD 57049

Title ASSOCIATION MANAGER, ASST. Title **PRESIDENT** 

> **SECRETARY** DEZZUTTO, JOHN

Name Name MCMILLAN, ELISE

Address 1530 MIRACLE STRIP PKWY 102D 1530 MIRACLE STRIP PKWY, SE Address FORT WALTON BEACH FL 32548 City-State-Zip:

FORT WALTON BEACH FL 32548 City-State-Zip:

Title

Title DIRECTOR Name BURWELL, DAVID WILSON, TOM Name

Address 2988 EAST MOUND STREET Address 856 EDGEWOOD DRIVE

City-State-Zip: COLUMBUS OH 43209 City-State-Zip: CHARLESTON WV 25302

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.