

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 742862

**FILED**  
**Jan 24, 2013**  
**Secretary of State**  
**CC8176780528**

**Entity Name:** SEASCAPE OF LITTLE HICKORY ISLAND, INC.

**Current Principal Place of Business:**

25810 HICKORY BLVD.  
BONITA SPRINGS, FL 34134

**Current Mailing Address:**

25810 HICKORY BLVD.  
BONITA SPRINGS, FL 34134 US

**FEI Number:** 59-1880436

**Certificate of Status Desired:** Yes

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

DAVIES, CHRISTOPHER N  
MERCATO-9110 STRADA PLACE  
SUITE 6200  
NAPLES, FL 34108 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title VP  
Name HOPKINSON, TOM  
Address 25810 HICKORY BLVD. #310  
City-State-Zip: BONITA SPRINGS FL 34134

Title P  
Name SCHNEIDER, LINDA  
Address 8472 S SHOREVIEW DRIVE  
City-State-Zip: TRAFALGAR IN 46181

Title SD  
Name CORCELLI, DIANE  
Address 25800 HICKORY BLVD #408  
City-State-Zip: BONITA SPRINGS FL 34134

Title D  
Name NEUKAM, FRITZ  
Address 28060 PALMAS GRANDES LN #202  
City-State-Zip: BONITA SPRINGS FL 34135

Title D  
Name DRENTH, KENNETH  
Address 25820 HICKORY BLVD #304  
City-State-Zip: BONITA SPRINGS FL 34134

Title T  
Name GARY, SWANSON  
Address 105 NORTH 12TH ST  
City-State-Zip: SAVANNAH GA 64485

*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:** LINDA SCHNEIDER

**PRESIDENT OF BOARD  
OF DIRECTORS**

**01/24/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date