

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762038

Entity Name: SEACLIFFS TOWNHOMES OWNERS' ASSOCIATION, INC.

FILED
Mar 01, 2015
Secretary of State
CC7387016358

Current Principal Place of Business:

128 BLUE MOUNTAIN RD
APT 4
SANTA ROSA BEACH, FL 32459

Current Mailing Address:

P.O. BOX 1976
SANTA ROSA BEACH, FL 32459 US

FEI Number: 59-2503218

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SULLIVAN, JAMES A
128 BLUE MOUNTAIN RD.
APT 4
SANTA ROSA BEACH, FL 32459 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 PRESIDENT
Name FLOURNOY, KATHERYN
Address 295 LSU AVE
City-State-Zip: BATON ROUGE LA 70808

Title VP
Name ALVAREZ, SALLY
Address 107 FOX RUN DRIVE
City-State-Zip: MANDEVILLE LA 70471

Title DIRECTOR
Name SULLIVAN, JAMES
Address 128 BLUE MOUNTAIN RD
 APT 4
City-State-Zip: SANTA ROSA BEACH FL 32459

Title DIRECTOR
Name POWERS, BILL
Address P.O. BOX 880211
City-State-Zip: STEAMBOAT SPRINGS CO 80488-0211

Title DIRECTOR
Name MEDINA, KAREN
Address 19825 CHANEY ROAD
City-State-Zip: ZACHARY LA 70791

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: JAMES A SULLIVAN

CAM

03/01/2015

Electronic Signature of Signing Officer/Director Detail

Date