## 2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000651

Entity Name: SEA COLONY NEIGHBORHOOD ASSOCIATION, INC.

**FILED** Apr 16, 2021 **Secretary of State** 3378726948CC

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

5455 A1A SOUTH

SUITE 3

SAINT AUGUSTINE, FL 32080

## **Current Mailing Address:**

5455 A1A SOUTH

SUITE 3

SAINT AUGUSTINE, FL 32080

FEI Number: 59-3634949 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

MAY MANAGEMENT SERVICES INC 5455 A1A SOUTH SAINT AUGUSTINE, FL 32080 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:

**DIRECTOR** Title Title **SECRETARY** LIST, GARY HAMMANN, GREGG Name Name

Address 5455 A1A SOUTH Address 5455 A1A SOUTH SUITE 3

SUITE 3

SAINT AUGUSTINE FL 32080 SAINT AUGUSTINE FL 32080 City-State-Zip: City-State-Zip:

Title **PRESIDENT** Title **TREASURER** 

LANGSTON, ROBERT RADER, M ELIZABETH Name Name

5455 A1A SOUTH 5455 A1A SOUTH Address Address

> SUITE 3 SUITE 3

SAINT AUGUSTINE FL 32080 SAINT AUGUSTINE FL 32080 City-State-Zip: City-State-Zip:

Title **DIRECTOR** 

RUSHING, TAMRA Name 5455 A1A SOUTH Address

SUITE 3

SAINT AUGUSTINE FL 32080 City-State-Zip:

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: ROBERT LANGSTON Electronic Signature of Signing Officer/Director Detail **PRESIDENT** 

04/16/2021 Date