

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03354

Entity Name: SEASCAPE CONDOMINIUM ASSOCIATION OF MANATEE, INC.**Current Principal Place of Business:**5135 GULF OF MEXICO DRIVE
LONGBOAT KEY, FL 34228**Current Mailing Address:**3200 GULF OF MEXICO DRIVE
LONGBOAT KEY, FL 34228 US**FEI Number:** 59-2656917**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LANGEVIN, LISA D
C/O CUNNINGHAM PROPERTY MANAGEMENT CORP.
3200 GULF OF MEXICO DRIVE
LONGBOAT KEY, FL 34228 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	P
Name	FRONTERA, BILL
Address	5135 GULF OF MEXICO DRIVE #101
City-State-Zip:	LONGBOAT KEY FL 34228

Title	VP
Name	AIELLO, RALPH
Address	35 WESCOTT STREET
City-State-Zip:	OLD TAPPAN NJ 07675

Title	D
Name	LARUSSO, JAY
Address	48 SANDRA LANE
City-State-Zip:	WAYNE NJ 07470

Title	T
Name	MCKENNA, MICHAELE
Address	5135 GULF OF MEXICO DRIVE #204
City-State-Zip:	LONGBOAT KEY FL 34228

Title	S
Name	MASSIK, CHARLOTTE
Address	5135 GULF OF MEXICO DRIVE #201
City-State-Zip:	LONGBOAT KEY FL 34228

Title	MGR
Name	LANGEVIN, LISA D
Address	3200 GULF OF MEXICO DRIVE
City-State-Zip:	LONGBOAT KEY FL 34228

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: LISA LANGEVIN

PROPERTY MANAGER

02/20/2013

Electronic Signature of Signing Officer/Director Detail_____
Date