

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000002196

**Entity Name:** SEANEST VILLAGE HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**THE ASSOCIATION OFFICE, INC.  
7 TOWN CENTER LOOP, STE C16  
SANTA ROSA BEACH, FL 32459**Current Mailing Address:**POST OFFICE BOX 1247  
SANTA ROSA BEACH, FL 32459**FEI Number:** 20-0992626**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**STENBERG, CINDY  
7 TOWN CENTER LOOP  
STE C16  
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	PD
Name	RYAN, CHARLES S
Address	4257 WALNUT GROVE ROAD
City-State-Zip:	MEMPHIS TN 38117

Title	DIRECTOR
Name	SIMPSON, MIKE
Address	908 STATE STREET
City-State-Zip:	BOWLING GREEN KY 42101

Title	DIRECTOR
Name	FINEFIELD, NANCY
Address	16409 FARMERS MILL LANE
City-State-Zip:	CHESTERFIELD MO 63005

Title	SECRETARY, TREASURER
Name	LACLAIR, JOHN D
Address	172 SAND OAKS CIRCLE
City-State-Zip:	SANTA ROSA BEACH FL 32459

Title	DIRECTOR
Name	TANGUIS, JEFFREY
Address	18051 CLUB VIEW DRIVE
City-State-Zip:	BATON ROUGE LA 70810

*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:** CHARLES S RYAN**PRESIDENT****04/07/2017**

Electronic Signature of Signing Officer/Director Detail

Date