

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000002613

**Entity Name:** SEYCHELLES OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

5115 GULF DRIVE  
PANAMA CITY BEACH, FL 32408

**Current Mailing Address:**

495 RICHARD JACKSON BLVD  
PANAMA CITY BEACH, FL 32407 US

**FEI Number:** 20-4660551

**Certificate of Status Desired:** No

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

BECKER & POLIAKOFF P.A.  
348 MIRACLE STRIP PARKWAY SW  
SUITE 7  
FORT WALTON BEACH, FL 32548 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:** IAN PATTERSON

01/20/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER  
Name           MINZNER, ALLAN  
Address        495 RICHARD JACKSON BLVD  
City-State-Zip: PANAMA CITY BEACH FL 32407

Title           VP  
Name           STEELE, JESSIE  
Address        495 RICHARD JACKSON BLVD  
City-State-Zip: PANAMA CITY BEACH FL 32407

Title           PRESIDENT  
Name           TURNER, BRIAN  
Address        494 RICHARD JACKSON BLVD  
City-State-Zip: PANAMA CITY BEACH FL 32407

Title           SECRETARY  
Name           TULLOCK, LARRY  
Address        495 RICHARD JACKSON BLVD  
City-State-Zip: PANAMA CITY BEACH FL 32407

Title           DIRECTOR  
Name           O'BOYLE, FRED  
Address        495 RICHARD JACKSON BLVD  
City-State-Zip: PANAMA CITY BEACH FL 32407

*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:** BRIAN TURNER

PRESIDENT

01/20/2023

Electronic Signature of Signing Officer/Director Detail

Date