I hereby certify that the information indicated on this report or supplemental report is true and accur oath; that I am an officer or director of the corporation or the receiver or trustee empowered to exec above, or on an attachment with all other like empowered.		
SIGNATURE: BRIAN TURNER	PRESIDENT	01/11/2016

SIGNATURE: BRIAN TURNER

City-State-Zip: COLUMBUS GA 31909

Electronic Signature of Signing Officer/Director Detail

Current Principal Place of Business: 5115 GULF DRIVE PANAMA CITY BEACH, FL 32408

Current Mailing Address:

546 MARY ESTHER CUT OFF SUITE 3 FORT WALTON BEACH, FL 32548 US

FEI Number: 20-4660551

Name and Address of Current Registered Agent:

BECKER & POLIAKOFF P.A. 427 MCKENZIE AVENUE PANAMA CITY, FL 32401 US

SIGNATURE: IAN PATTERSON

Certificate of Status Desired: No

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.

				01/11/2010
	Electronic Signature of Registered Agent			Date
Officer/Dire	ctor Detail :			
Title	PRESIDENT	Title	TREASURER	
Name	TURNER, BRIAN	Name	MINZNER, ALLAN	
Address	1109 LENNY LANE	Address	7991 CAPE SAN BLAS RD	
City-State-Zip:	CHATTANOOGA TN 37421	City-State-Zip:	PORT ST JOE FL 32456	
Title	SECRETARY	Title	VP	
Name	TONKIN, GREGG	Name	WILSON, JOHN (RICK)	
Address	66 ROAD 9042	Address	5115 GULF DRIVE	
City-State-Zip:	FORT PAYNE AL 35968	City-State-Zip:	UNIT# 307 PANAMA CITY BEACH FL 3240	8
Title	DIRECTOR			
Name	KEEBLER, GLENN			
Address	6960 STABLE DRIVE			

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0600002613

Entity Name: SEYCHELLES OWNERS ASSOCIATION, INC.

Jan 11, 2016 Secretary of State CC2120550094

FILED

Date

01/11/2016