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 WILSON	SEC	11/13/2017

Electronic Signature of Signing Officer/Director Detail

(Ν City-State-Zip: CAPE CORAL FL 33904 City-State-Zip: CAPE CORAL FL 33904

C

SIGNATURE	BRIAN WILSON		11/13/2017
	Electronic Signature of Registered Agent		Date
Officer/Dire	ctor Detail :		
Title	PRESIDENT	Title	TREASURER
Name	WILSON, BARBARA J	Name	WILSON, DARLENE
Address	1217 CAPE CORAL PKWY E #168	Address	1217 CAPE CORAL PKWY E #168
City-State-Zip:	CAPE CORAL FL 33904	City-State-Zip:	CAPE CORAL FL 33904
Title	SECRETARY	Title	ASSISTANT TREASURER
Name	WILSON, BRIAN	Name	RAND, JOHN
Address	1217 CAPE CORAL PKWY E #168		1019 SE 40TH ST.
City State Zin:			UNIT C

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.

1217 CAPE CORAL PKWY E #168 CAPE CORAL, FL 33904 US

Entity Name: SEATUIT CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1217 CAPE CORAL PKWY E #168 CAPE CORAL, FL 33904

DOCUMENT# N06000012330

REPORT

CAPE CORAL, FL 33904 US

FEI Number: 20-8787394

BRIAN, WILSON L

Current Mailing Address:

1217 CAPE CORAL PKWY E #168

Name and Address of Current Registered Agent:

2017 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL FILED Nov 13, 2017

Certificate of Status Desired: No

Date

Secretary of State CC0078033804