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: RICK HELFAND

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# N0800000565 Entity Name: THE SEASIDE SCHOOL FOUNDATION, INC.

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

10 SMOLIAN CIRCLE SANTA ROSA BEACH, FL 32459

Current Mailing Address:

P.O. BOX 4610 SANTA ROSA BEACH, FL 32459 FL

FEI Number: 26-1979343

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

HELFAND, RICK 10 SMOLIAN CIRCLE SANTA ROSA BEACH, FL 32459 US 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.

SIGNATURE:

Officer/Director Detail : Title D Title D WILLIAMS, ROSEMARY Name BARTON, PETE Name 600 COON RD. Address 237 CALLE ESCADA Address City-State-Zip: SANTA ROSA BEACH FL 32459 WYOMING PA 18644 City-State-Zip: Title D Title D Name HELFAND, RICK KHOURY-VOGT, MARIEANNE Name Address P.O. BOX 4910 Address P.O. BOX 61-5700 SANTA ROSA BEACH FL 32459 City-State-Zip: City-State-Zip: ALYS BEACH FL 32461 Title D GILBERT, RUSS Name P.O. BOX 4603 Address City-State-Zip: SANTA ROSA BEACH FL 32459

PRESIDENT

01/20/2015

FILED Jan 20, 2015 Secretary of State CC9774706994

Date

Date