

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09715

Entity Name: THE VILLAGES OF SEAPORT CONDOMINIUM ASSOCIATION, INC.**FILED**
Feb 22, 2018
Secretary of State
CC6618811291**Current Principal Place of Business:**8850 NORTH ATLANTIC AVENUE
CAPE CANAVERAL, FL 32920**Current Mailing Address:**120 SEAPORT BLVD.
CAPE CANAVERAL, FL 32920 US**FEI Number: 59-2761372****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**KLEMM, RUSSELL E
1065 MAITLAND CENTER COMMONS BLVD.
MAITLAND, FL 32751 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	PRESIDENT
Name	HEALEY, DOROTHY
Address	120 SEAPORT BLVD
City-State-Zip:	CAPE CANAVERAL FL 32920

Title	VICE PRESIDENT/TREASURER
Name	MUELLER, RICHARD
Address	120 SEAPORT BLVD
City-State-Zip:	CAPE CANAVERAL FL 32920

Title	SECRETARY
Name	KOERMER, JOANNE
Address	120 SEAPORT BLVD
City-State-Zip:	CAPE CANAVERAL FL 32920

Title	DIRECTOR-AT-LARGE
Name	ROMICK, RICHARD
Address	120 SEAPORT BLVD
City-State-Zip:	CAPE CANAVERAL FL 32920

Title	DIRECTOR-AT-LARGE
Name	PARKER, SUZANNE
Address	120 SEAPORT BLVD.
City-State-Zip:	CAPE CANAVERAL FL 32920

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: DOROTHY HEALEY**PRESIDENT****02/22/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date