2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 714074

Entity Name: SEAGATE MANOR CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:	**New Principal Place of Business:**
400 SEASAGE DRIVE DELRAY BEACH, FL 334836754	

Current Mailing Address:	**New Mailing Address:**
400 SEASAGE DRIVE DELRAY BEACH, FL 334836754	

FEI Number: 59-1258140   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
SPALL, MICHAEL T 400 SEASAGE DR 107 DELRAY BEACH, FL 33483 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

OFFICERS AND DIRECTORS:

Title: PD
Name: BRYAN, ALDEN
Address: 400 SEASAGE DR., APT.# 504
City-St-Zip: DELRAY BCH, FL 33483

Title: VPD
Name: NORTON, PATRICK
Address: 400 SEASAGE DR..# 804
City-St-Zip: DELRAY BCH., FL 33483

Title: TRD
Name: BAKER, BARRY
Address: 400 SEA SAGE DR., APT.# 201
City-St-Zip: DELRAY BCH, FL 33483

Title: SD
Name: ROSENBERG, BILL
Address: 400 SEASAGE DR., APT.# 304
City-St-Zip: DELRAY BCH, FL 33483

Title: D
Name: POLLOCK, BARBARA T
Address: 400 SEASAGE DR., APT. #1005
City-St-Zip: DELRAY BCH, FL 33483

Title: D
Name: WICKWIRE, GEOFFREY DR
Address: 400 SEA SAGE DRIVE, APT.#404
City-St-Zip: DELRAY BEACH, FL 33483

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: ALDEN BRYAN   PD   03/21/2012

Electronic Signature of Signing Officer or Director   Date