

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720530

FILED
Apr 11, 2012
Secretary of State

Entity Name: SEACREST VILLAS ASSOCIATION, INC.

Current Principal Place of Business:

1810 N. PALM WAY
BOYNTON BEACH, FL 33435

New Principal Place of Business:

Current Mailing Address:

C/O MANAGMENT SERVICES
5011 N. OCEAN BLVD.
OCEAN RIDGE, FL 33435

New Mailing Address:

FEI Number: 63-0645366

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GAIL, AASKOV A MANAGER
% MANAGEMENT SERVICES P.B.
5011 N OCEAN BLVD.
OCEAN RIDGE, FL 33435 US

Name and Address of New Registered Agent:

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: DP
Name: GULICK, ANDREW
Address: 1829 NEW PALM WAY #307.
City-St-Zip: BOYNTON BEACH, FL 33435

Title: D
Name: SCHMITT, RONALD
Address: 1810 NEW PALM WAY #317
City-St-Zip: BOYNTON BEACH, FL 33435

Title: VP
Name: LARKIE, ROBERT
Address: 1820 NEW PALM WAY #106
City-St-Zip: BOYNTON BEACH, FL 33435

Title: DS
Name: MEAKINGS, RUTH
Address: 1820 NEW PALM WAY #301
City-St-Zip: BOYNTON BEACH, FL 33435

Title: DT
Name: SWEENEY, JOSEPH
Address: 1810 NEW PALM WAY #216
City-St-Zip: BOYNTON BEACH, FL 33435

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: ANDREW GULICK

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04/11/2012

Electronic Signature of Signing Officer or Director

Date