

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739947

FILED
Mar 08, 2012
Secretary of State

Entity Name: SEASCAPE, PHASE TWO, ASSOCIATION, INC.

Current Principal Place of Business:

49 CORTE PALMA
SANTA ROSA BEACH, FL 32459

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 6652
MIRAMAR BEACH, FL 32550

New Mailing Address:

FEI Number: 59-1788673

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORCORAN, THOMAS J
49 CORTE PALMA
SANTA ROSA BEACH, FL 32459 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: PRES
Name: BOGARDUS, T.B.
Address: PO BOX 6871
City-St-Zip: DESTIN, FL 325501015

Title: DIR
Name: TAYLOR, TOM
Address: 100 SEACAPE DR 22-D
City-St-Zip: DESTIN, FL 32550

Title: DIR
Name: SMITH, ROBERT
Address: 879 ARTWOOD ROAD NE
City-St-Zip: ATLANTA, GA 303071301

Title: DIR
Name: POTTER, JAMES
Address: 1022 FOREST LANE
City-St-Zip: ANNISTON, AL 36207

Title: DIR
Name: RONEY, JAMES
Address: 3966 FORRESTAL DRIVE
City-St-Zip: CHAMBLEE, GA 30341

Title: STD
Name: HARRIS, JAMES
Address: 2564 PALM SHORES DRIVE
City-St-Zip: SHALIMAR, FL 32579

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: BRUCE BOGARDUS

PRES

03/08/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date