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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # 753036

1. Corporation Name

SEASCAPE OF NORTH REDINGTON BEACH CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

16800 GULF BLVD N
 N REDINGTON BEACH
 LARGO FL 33708
 US

Mailing Address

PAREKH, COMMONS AND CO
 2700 E BAY DR #107
 LARGO FL 33771
 US



2. Principal Place of Business

21 16800 GULF BLVD N
 Suite, Apt. #, etc.

22 N. REDINGTON BEACH, FL
 City & State

23 33708 US
 Zip Country

24 25 29 30

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified

06/20/1980

4. FEI Number

59-2071309

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

HICKS, BOB
 3101 SAMARA DR
 TAMPA FL 33618

10. Name and Address of New Registered Agent

81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DELETE
 NAME TD
 JAHNA, JEANNE
 STREET ADDRESS 406 MASTERPIECE ROAD
 CITY-ST-ZIP LAKE WALES FL 33853

TITLE DELETE
 NAME PB VD
 HICKS, BOB
 STREET ADDRESS 3101 SAMARA DRIVE
 CITY-ST-ZIP TAMPA, FLORIDA 33618

TITLE DELETE
 NAME SD
 APGAR, MARTHA
 STREET ADDRESS 16 HILLCREST RD
 CITY-ST-ZIP MARTINSVILLE NJ 08836

TITLE DELETE
 NAME VB PS
 ROSS, LORRANE
 STREET ADDRESS 16800 GULF BLVD #12
 CITY-ST-ZIP N REDINGTON BEACH FL 33708

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition
 1.2 NAME
 1.3 STREET ADDRESS
 1.4 CITY-ST-ZIP

2.1 TITLE Change Addition
 2.2 NAME
 2.3 STREET ADDRESS
 2.4 CITY-ST-ZIP

3.1 TITLE Change Addition
 3.2 NAME
 3.3 STREET ADDRESS
 3.4 CITY-ST-ZIP

4.1 TITLE Change Addition
 4.2 NAME
 4.3 STREET ADDRESS
 4.4 CITY-ST-ZIP

5.1 TITLE Change Addition
 5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY-ST-ZIP

6.1 TITLE Change Addition
 6.2 NAME
 6.3 STREET ADDRESS
 6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/20/99
 Date

813/286-7222
 Daytime Phone #

CR2E037 (11/98)