

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 770563

FILED
Feb 06, 2012
Secretary of State

Entity Name: SEASCAPE CONDOMINIUM MANAGEMENT ASSOCIATION, INC.

Current Principal Place of Business:

2290 OCEAN SHORE BLVD., SUITE 201
ORMOND BEACH, FL 32176 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1888
ORMOND BEACH, FL 32175 US

New Mailing Address:

FEI Number: 59-2329191 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

A1A TAX & BOOKKEEPING, INC.
1236 OCEAN SHORE BLVD
ORMOND BEACH, FL 32176 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: P
Name: JOSEPH, GIUFFRE
Address: 2290 OCEAN SHORE BLVD #302
City-St-Zip: ORMOND BEACH, FL 32176

Title: VP
Name: WOODHAM, SUE
Address: 2290 OCEAN SHORE BLVD.#102
City-St-Zip: ORMOND BEACH, FL 32176

Title: T
Name: PALVISAK, KARL
Address: 2290 OCEAN SHORE BLVD #104
City-St-Zip: ORMOND BEACH, FL 32176

Title: S
Name: HENKEL, PATTY
Address: 2290 OCEAN SHORE BLVD., #307
City-St-Zip: ORMOND BEACH, FL 32176

Title: DL
Name: NORRED, VIRGINIA
Address: 2290 OCEAN SHORE BLVD #305
City-St-Zip: ORMOND BEACH, FL 32176

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: VIRGINIA NORRED

DL

02/06/2012

Electronic Signature of Signing Officer or Director

Date