

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 856521

Entity Name: SEASCAPE RESORTS, INC.

FILED  
Mar 12, 2009  
Secretary of State

## Current Principal Place of Business:

100 SEASCAPE DR  
DESTIN, FL 32541

## New Principal Place of Business:

## Current Mailing Address:

100 SEASCAPE DR  
DESTIN, FL 32541

## New Mailing Address:

FEI Number: 63-0847749

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LORI ELLEN WARD, ESQ.  
MATTHEWS & HAWKINS, P.A.  
4475 LEGENDARY DR.  
DESTIN, FL 32541 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: OSBORN, MARK  
Address: 4766 HWY 280  
City-St-Zip: BIRMINGHAM, AL 32543

Title: VD ( ) Delete  
Name: OSBORN, BUSTER  
Address: 4766 HWY 280  
City-St-Zip: BIRMINGHAM, AL 35243

Title: TS ( ) Delete  
Name: FLEISHER, DAVID  
Address: 100 SEASCAPE DRIVE  
City-St-Zip: DESTIN, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: BOD (X) Change ( ) Addition  
Name: OSBORN, MARK  
Address: 4766 HWY 280  
City-St-Zip: BIRMINGHAM, AL 32543

Title: P (X) Change ( ) Addition  
Name: OSBORN, MARCUS B  
Address: 4766 HWY 280  
City-St-Zip: BIRMINGHAM, AL 35243

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARCUS B. OSBORN

P

03/12/2009

Electronic Signature of Signing Officer or Director

Date