2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Jun 02, 2003 8:00 am Secretary of State

DOCUMENT # NO2000 1. Entity Name SEASCAPE CONDOMINIUM ASSOCIAT NC.		04-18-2003 90229	9 004 ***		25				
Principal Place of Business 431 SOUTH SURF ROAD HOLLYWOOD FL 33018	Mailing Address 431 SOUTH SURF ROAD HOLLYWOOD FL 33019			75047991					
2. Principal Place of Business 3. Mailing Address									
Suite, Apt. #, etc. Suite, Apt. #, etc.			· ·	CHECK HERE IF MAKING CHANGES					
City & State City & State				4. FEI Number 59 _ 18	23019	\longrightarrow	pplied tot Ap	d For	-
Zip Country	Zip Coun		untry	5. Certificate of Sta	tus Desired	\$8.75 Ac Fee Requir		al	
6. Name and Address of Current	Registered Agent			7. Name and Addre	ses of New Registered	Agent		1	1
LANDY, NANCI S ESO.			Name	<u> </u>	ساستجاست ب	<u> </u>			
801 N.E. 167TH STREET, 2ND FLOOR NORTH MIAME BEACH FL 33162			Street Address (P.O. Box Number is No	ot Acceptable)]
Programme and the second of th			City	er ent ur (eg. mir t.g.	FI FI	Zip Co	de	}	1
The above named entity submits this statement for the obligations of registered agent.						familiar with	and a	accept	j~`
SIGNATURE			· · · · · · · · · · · · · · · · · · ·				·	<u> </u>	
Signature, typed or printed name of registered agent i	uno see a appacable. (NOT	E: Hegistere	d Agent signature required	when reinstating)	DATE	'		1	Į
FILE NOW: FEE IS \$61.25	9. Election Car Trust Fund C			\$5.00 May Be Added to Fees	Make Cheo Florida Depa			3	
10. OFFICERS AND DIF	RECTORS	11.	. ·	ADDITIONS/CHANGES	TO OFFICERS AND D	IAECTORS II	N 10	<u>'</u> 	1_
MANE RESIDENT R. C		NAM				☐ Change		Addition	110/02
STREET ADDRESS 431 S. Suria RJ	· ·								18
HS CULLBON , FC	K A CENTING	TITLE	-ST-ZIP			Change		Addition	ĺ
HAME 4415 SURFRA	SHATZ (D)) NAM		·					ľ
STREET ADDRESS CITY-ST-ZIP THE CLYWOOD, FL			ET ADDRESS - ST- ZIP					_	
MILE Secretary	☐ Delete	TITLE				Change	۵	Addition	
STREET ADDRESS MARCH Y MAGILIAN	,	TSTRE	ET ADDRESS	٠			ļ		١.
CITY-ST-ZIP Howy The	3018	1	-ST-ZIP						l
NAME REASORER	☐ Delete	, TITLE NAME				☐ Change	U	Addition	
STREET ADDRESS 40 5 5 5 F	id	STRE	et address						
	33019	CITY-	-ST-ZIP			=			,
TITLE NAME	Delete	NAME	ŀ			Change		Addition	
STREET ADDRESS CITY-ST-ZIP		STREE	ET ADORESS -ST-ZIP				İ		
TITLE	□ Delete	TITLE	 -		- 	☐ Change	<u>_</u>	Addition	
NAME		— ·''-					'رت		ı
STREET ADDRESS	54,714	NAME	1				- 1		١.
CITY-ST-ZIP .		STREE	E ET ADORESS ST-ZIP					1	ļ

Indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

MICHATURE OF PRINTED NAME OF STANDARD OFFICE OF THE

4/13/03

954-566-1440