

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009738

FILED  
Feb 05, 2009  
Secretary of State

**Entity Name:** SEVEN SEAS CRUISING ASSOCIATION FOUNDATION, INC.

**Current Principal Place of Business:**

2501 E COMMERCIAL BLVD STE 201  
FT LAUDERDALE, FL 33308

**New Principal Place of Business:**

**Current Mailing Address:**

2501 E COMMERCIAL BLVD STE 201  
FT LAUDERDALE, FL 33308

**New Mailing Address:**

FEI Number: 20-3302730

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GOODMAN, DONALD  
2501 E. COMMERCIAL BLVD.  
STE. 201  
FT LAUDERDALE, FL 33308 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: TD ( ) Delete  
Name: LEEDS, STEPHEN  
Address: 900 RIVER REACH DR., UNIT 112  
City-St-Zip: FT LAUDERDALE, FL 33315 US

Title: TVPS ( ) Delete  
Name: MCCOURT, LAURA  
Address: 1350 RIVER REACH DR., UNIT 309  
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: TT ( ) Delete  
Name: GOODMAN, DONALD  
Address: 3201 NE 183 ST. #1503  
City-St-Zip: AVENTURA, FL 33160

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DONALD GOODMAN

TT

02/05/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date