

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09715

FILED
Mar 14, 2011
Secretary of State

Entity Name: THE VILLAGES OF SEAPORT CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

8850 NORTH ATLANTIC AVENUE
CAPE CANAVERAL, FL 32920

New Principal Place of Business:

Current Mailing Address:

120 N. SEAPORT BLVD.
CAPE CANAVERAL, FL 32920

New Mailing Address:

FEI Number: 59-2761372

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KLEMM, RUSSELL E
1065 MAITLAND CENTER COMMONS BLVD.
MAITLAND, FL 32751 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: PD
Name: EDWARDS, TOM
Address: 600 SEAPORT BLVD
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: VPD
Name: JONES, WILLIAM
Address: 225 SEAPORT BLVD
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: SEC
Name: OLWELL, EDWARD
Address: 235 SEAPORT BLVD
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: TREA
Name: HEALEY, DOROTHY
Address: 137 SEAPORT BLVD
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: DIR
Name: WALSH, BETTY
Address: 140 SEAPORT BLVD
City-St-Zip: CAPE CANAVERAL, FL 32920

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: TOM EDWARDS

PD

03/14/2011

Electronic Signature of Signing Officer or Director

Date