

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jun 04, 2012
Secretary of State

DOCUMENT# N30293

Entity Name: THE SEAPORT OCEANFRONT 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 SEAPORT BLVD
CAPE CANAVERAL, FL 32920**New Mailing Address:****FEI Number:** 59-2827623**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SEAPORT OCEANFRONT CONDO ASSOCIATION INC
120 SEAPORT BLVD
CAPE CANAVERAL, FL 32920 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: CLARKE, RICHARD
Address: 806 MYSTIC DR #D304
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: VPD
Name: PETERS, BILLY
Address: 816 MYSTIC DR #A509
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: SEC
Name: FORTINI, ELEANOR
Address: 817 MYSTIC DR #B309
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: TREA
Name: RASMUSSEN, ERIC
Address: 807 MYSTIC DR #C209
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: DIR
Name: LABELLA, JOHN
Address: 807 MYSTIC DR #C502
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: RICHARD CLARKE

PD

06/04/2012

Electronic Signature of Signing Officer or Director

Date