

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 715187

**Entity Name:** SPACE COAST ASSOCIATION OF REALTORS, INC.**Current Principal Place of Business:**2950 PINEDA PLAZA WAY  
PALM SHORES , FL 32940**Current Mailing Address:**2950 PINEDA PLAZA WAY  
PALM SHORES , FL 32940 US**FEI Number:** 23-1250368**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SELIG, LEAH M  
2950 PINEDA PLAZA WAY  
PALM SHORES , FL 32940 US*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

**Officer/Director Detail :**

Title VP  
Name WEEKS , PATRICIA  
Address 30 N. BREVARD AVENUE  
City-State-Zip: COCOA BEACH FL 32931

Title DIRECTOR  
Name HENDRICKS, LYNNETTE  
Address 262 E. MERRITT ISLAND CAUSEWAY  
City-State-Zip: MERRITT ISLAND FL 32953

Title DIRECTOR  
Name SELIG , MICHAEL  
Address 200 WILLARD STREET  
City-State-Zip: COCOA FL 32922

Title DIRECTOR  
Name RAMAGE , KERRY  
Address 6022 FARCENDA PLACE  
City-State-Zip: MELBOURNE FL 32940

Title TREASURER  
Name MCLEAN , LOUISE  
Address 2235 N, COURTENAY PKWY  
City-State-Zip: MERRITT ISLAND FL 32953

Title CEO  
Name SELIG, LEAH  
Address 2950 PINEDA PLAZA WAY  
City-State-Zip: PALM SHORES FL 32940

Title TREASURER  
Name BASILE, DENNIS  
Address 2330 N. WICKAHM ROAD #8  
City-State-Zip: MELBOURNE FL 32935

Title DIRECTOR  
Name BRITTON , JIM  
Address 476 HWY A1A SUITE 3B  
City-State-Zip: SATELLITE BEACH FL 32937

**Continues on page 2**

*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:** LEAH SELIG

CEO

01/10/2020

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name MCLEAN , LOUISE  
Address 2235 N. COURTENAY PKWY CAUSEWAY  
City-State-Zip: MERRITT ISLAND FL 32953

Title DIRECTOR  
Name WHELPLEY , LYNN  
Address 1900 S. HARBOUR CITY BLVD  
215-A  
City-State-Zip: MELBOURNE FL 32901

Title DIRECTOR  
Name CRISAFULLI , TAMARA  
Address 2235 N. COURTENAY PKWY.  
City-State-Zip: MERRITT ISLAND FL 32953

Title PRESIDENT  
Name GOLDMAN , MELISSA  
Address 201 N. RIVERSIDE DR.  
City-State-Zip: INDIALANTIC FL 32903

Title DIRECTOR  
Name MASONE , REAGAN  
Address 2040 HWY A1A  
207  
City-State-Zip: INDIAN HARBOUR BEACH FL 32937

Title DIRECTOR  
Name RIBAK , MITCH  
Address 21 RIVERSIDE DR.  
A  
City-State-Zip: INDIALANTIC FL 32903