

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734630

Entity Name: SEVEN SEAS CRUISING ASSOCIATION, INC.**Current Principal Place of Business:**10211 WEST SAMPLE ROAD
SUITE 114
CORAL SPRINGS, FL 33065**Current Mailing Address:**10211 WEST SAMPLE ROAD
SUITE 114
CORAL SPRINGS, FL 33065 US**FEI Number:** 59-1669131**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MKAM, JUDITH R
10211 WEST SAMPLE ROAD
SUITE 114
CORAL SPRINGS, FL 33065 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 TREASURER
Name STEVE, ROSENTHAL
Address PO BOX 37
City-State-Zip: BECKET MA 01223Title PRESIDENT
Name KAUFFMANN, STEVEN
Address 181 LA VEGA SW
City-State-Zip: ALBUQUERQUE NM 87105Title DIRECTOR
Name TUTTLE, GLENN
Address 1361 JACANA CT
City-State-Zip: PUNTA GORDA FL 33950Title DIRECTOR
Name ROMBERG, BETTY
Address 738 FAIRVIEW LANE
City-State-Zip: FORKED RIVER NJ 08731Title RS
Name MKAM, JUDITH R
Address 11049 NW 46TH DR
City-State-Zip: CORAL SPRINGS FL 33076Title VP
Name BOREN, RICHARD
Address PO BOX 1505
City-State-Zip: MORRO BAY CA 93443Title DIRECTOR
Name PETERSON, RICHARD
Address 606 RIVIERA DUNES WAY
 # 408
City-State-Zip: PALMETTO FL 34221Title DIRECTOR
Name CATHY, BARTH
Address 411 WALNUT STREET
 #9372
City-State-Zip: GREEN COVE SPRINGS FL 32043

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: JUDITH R MKAM**RECORDING SECRETARY** 02/08/2016_____
Electronic Signature of Signing Officer/Director Detail_____
Date