

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 741813

**Entity Name:** SEASCAPE CLUSTER, INCORPORATED

**Current Principal Place of Business:**

2400 SOUTH OCEAN DRIVE  
FT. PIERCE, FL 34949

**Current Mailing Address:**

C/O ELLIOTT MERRILL MANAGEMENT  
835 20TH PL  
VERO BEACH, FL 32960 US

**FEI Number:** 59-1874037

**Certificate of Status Desired:** No

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

BECKER & POLIAKOFF  
625 N. FLAGLER DRIVE  
7TH FLOOR  
WEST PALM BEACH, FL 33401 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, SECRETARY  
Name SMITH, JOHN  
Address 2400 S. OCEAN DR. #4300A  
City-State-Zip: FT. PIERCE FL 34949

Title SECRETARY  
Name SULLIVAN, DANIEL  
Address 2400 S. OCEAN DR. #4284  
City-State-Zip: FORT PIERCE FL 34949

Title PRESIDENT  
Name GILLIS, ROSS  
Address 2400 S. OCEAN DR. #4262  
City-State-Zip: FT. PIERCE FL 34949

Title DIRECTOR  
Name CHUMBLEY, EUGENE  
Address 2400 S. OCEAN DRIVE #4384  
City-State-Zip: FORT PIERCE FL 34949

Title TREASURER  
Name LASSEN, JAMES  
Address 2400 S. OCEAN DRIVE #4272  
City-State-Zip: FORT PIERCE FL 34949

*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:** ROSS GILLIS

**PRESIDENT**

**04/24/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date