## **2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# 770563** 

Entity Name: SEASCAPE CONDOMINIUM MANAGEMENT ASSOCIATION, INC.

FILED Apr 08, 2013 Secretary of State CC4946228637

## **Current Principal Place of Business:**

2290 OCEAN SHORE BLVD., SUITE 201 ORMOND BEACH. FL 32176

## **Current Mailing Address:**

P.O. BOX 1527

ORMOND BEACH. FL 32175 US

FEI Number: 59-2329191 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

INTRACOASTAL BOOKKEEPING & MANAGEMENT 1100 OCEAN SHORE BLVD #9 ORMOND BEACH, FL 32176 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: DEBORAH KREINEST 04/08/2013

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title P Title VP

Name JOSEPH, GIUFFRE Name WOODHAM, SUE

Address 2290 OCEAN SHORE BLVD #302 Address 2290 OCEAN SHORE BLVD.,#102

City-State-Zip: ORMOND BEACH FL 32176 City-State-Zip: ORMOND BEACH FL 32176

Title T Title S

Name PALVISAK, KARL Name HENKEL, PATTY

Address 2290 OCEAN SHORE BLVD #104 Address 2290 OCEAN SHORE BLVD., #307

City-State-Zip: ORMOND BEACH FL 32176 City-State-Zip: ORMOND BEACH FL 32176

Title DL

Name NORRED, VIRGINIA

Address 2290 OCEAN SHORE BLVD #305 City-State-Zip: ORMOND BEACH FL 32176

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: JOSEPH GIUFFRE PRESIDENT 04/08/2013