

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

DOCUMENT# N33050

**Entity Name:** SEAGATE COVE YACHT CLUB, INC.

**Current Principal Place of Business:**

344 VENETIAN DRIVE  
DELRAY BEACH, FL 33483

**Current Mailing Address:**

344 VENETIAN DRIVE  
DELRAY BEACH, FL 33483 US

**FEI Number:** 65-0143007

**Certificate of Status Desired:** No

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

ST. JOHN ROSSIN BURR & LEMME, PLLC  
1601 FORUM PLACE  
STE 700  
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 D  
Name MILLER, MARTIN V  
Address 344 VENETIAN DRIVE, UNIT 2  
City-State-Zip: DELRAY BEACH FL 33483

Title D. S.  
Name VOGT, CATHERINE P  
Address 344 VENETIAN DRIVE, UNIT 1  
City-State-Zip: DELRAY BEACH FL 33483

Title D. T.  
Name ROSS, KATHRYN  
Address 344 VENETIAN DRIVE, UNIT 4  
City-State-Zip: DELRAY BEACH FL 33483

Title D. P.  
Name MORRISSETTE, PETER  
Address 344 VENETIAN DRIVE UNIT 5  
City-State-Zip: DELRAY BEACH FL 33483

Title D.  
Name SOUTH FLORIDA OCEAN  
PROPERTIES  
Address 344 VENETIAN DRIVE UNIT 3  
City-State-Zip: DELRAY BEACH FL 33483

*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:** PETER MORRISSETTE

**PRES.**

**03/15/2013**

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

\_\_\_\_\_  
Date