

2014 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: CATHERINE P VOGT**DIRECTOR AND
SECRETARY****01/15/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date