

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000115787

**Entity Name:** SEAGIS UNIVERSITY PARK, INC.

**Current Principal Place of Business:**

% SEAGIS PROPERTY GROUP  
ONE TOWER BRIDGE, 100 FRONT STREET,STE 350  
WEST CONSHOCKEN, PA 19428

**Current Mailing Address:**

% SEAGIS PROPERTY GROUP  
ONE TOWER BRIDGE, 100 FRONT STREET,STE 350  
WEST CONSHOCKEN, PA 19428 US

**FEI Number: 26-3423921**

**Certificate of Status Desired: No**

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

ZEVALLS, STEPHANIE  
C/O SEAGIS PROPERTY GROUP LP  
11340 INTERCHANGE CIRCLE NORTH  
MIRAMAR, FL 33025 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 P  
Name BEGIER, JOHN  
Address % ONE TOWER BRIDGE, 100 FRONT STREET #350  
City-State-Zip: WEST CONSHOCKEN PA 19428

Title VP  
Name LEE, CHARLES  
Address % ONE TOWER BRIDGE, 100 FRONT STREET #350  
City-State-Zip: WEST CONSHOCKEN PA 19428

Title ST  
Name MOYER, KENNETH  
Address % ONE TOWER BRIDGE, 100 FRONT STREET #350  
City-State-Zip: WEST CONSHOCKEN PA 19428

Title MGR  
Name MCKENNA, TIMOTHY E  
Address % ONE TOWER BRIDGE, 100 FRONT STREET #350  
City-State-Zip: WEST CONSHOCKEN PA 19428

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: TIMOTHY MCKENNA**

**CFO**

**02/23/2021**

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

\_\_\_\_\_  
Date