


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2005 8:00 am
Secretary of State

05-03-2005 90137 031 ****61.25

DOCUMENT # 725388
 1. Entity Name
SARABAY COVES ASSOCIATION, INC.



Principal Place of Business
310 PEARL AVENUE
SARASOTA, FL 34243 US

Mailing Address
310 PEARL AVENUE
SARASOTA, FL 34243 US

50046770



2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

01042005 Chg-NP CR2E037 (10/03)

City & State

4. FEI Number
59-1543899

Applied For
 Not Applicable

City & State

Zip Country Zip Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DELLCOR MANAGEMENT
310 PEARL AVE.
SARASOTA, FL 34243

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** Delete
 NAME **TURDIK, GEORGE**
 STREET ADDRESS **5665 COUNTRY LAKES DR.**
 CITY-ST-ZIP **SARASOTA, FL 34243**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** Delete
 NAME **GLANOVSKY, EDWARD**
 STREET ADDRESS **1714 69TH AVE W B208**
 CITY-ST-ZIP **BRADENTON, FL**

TITLE **D** Change Addition
 NAME **Grace Davis**
 STREET ADDRESS **1714 69th AVE W B208**
 CITY-ST-ZIP **Bradenton FL 34209**

TITLE **D** Delete
 NAME **ZAGONY, STEVE**
 STREET ADDRESS **1714 - 69 AVE. W.**
 CITY-ST-ZIP **BRADENTON, FL 34209**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** Delete
 NAME **CURTIS, JAMES**
 STREET ADDRESS **1714 69TH AVE. W. #C203**
 CITY-ST-ZIP **BRADENTON, FL 34209**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **William Whitmer**
 STREET ADDRESS **1714 69th Ave W #C203**
 CITY-ST-ZIP **Bradenton FL 34209**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ **4/21/05** **941358-3366**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #