

FILE NOW: FILING FEE IS \$61.25

FILED

Jan 27 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 725761 (1)
1. Corporation Name
SUGAR SANDS CONDOMINIUM ASSOCIATION INC



Principal Place of Business: 1241 SUGAR SANDS BLVD. RIVIERA BEACH FL 33404
Mailing Address: 1241 SUGAR SANDS BLVD. RIVIERA BEACH FL 33404-3147

3. Date Incorporated or Qualified: 03/09/1973
3a. Date of Last Report: 03/26/1996

2. Principal Place of Business: 21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

4. FEI Number: 59-1554808
Applied For: Not Applicable
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
DIREKTOR, KENNETH S.
500 AUSTRALIAN AVE. SOUTH
9TH FLOOR
WEST PALM BEACH FL 33401

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code: FL

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> DELETE
NAME	RASMUSSEN, JAY A	
STREET ADDRESS	1262 SUGAR SANDS BLVD.	
CITY-ST-ZIP	RIVIERA BEACH FL 33404	
TITLE	DS	<input type="checkbox"/> DELETE
NAME	SCHMIDT, MARILYN	
STREET ADDRESS	1190 SUGAR SANDS BLVD.	
CITY-ST-ZIP	RIVIERA BEACH FL 33404	
TITLE	DVP	<input type="checkbox"/> DELETE
NAME	WOODLAND, ROMEL J	
STREET ADDRESS	1170 SUGAR SANDS BLVD.	
CITY-ST-ZIP	RIVIERA BEACH FL 33404	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	O'NEILL, CHARLES C.	
STREET ADDRESS	1251 SUGAR SANDS BLVD	
CITY-ST-ZIP	RIVIERA BEACH FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Woodland, Rommel J.
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	33404
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Charles C. O'Neill* 1-16-97 561-844-5630
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0040018

CR2E037 (9/96)