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Secretary of State

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NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 725761

1. Corporation Name

SUGAR SANDS CONDOMINIUM ASSOCIATION INC

Principal Place of Business

1241 SUGAR SANDS BLVD.  
1242 N SUGAR SANDS BLVD  
RIVIERA BEACH FL 33404  
US

Mailing Address

1241 SUGAR SANDS BLVD.  
1242 N SUGAR SANDS BLVD  
RIVIERA BEACH FL 33404  
US



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

03/09/1973

22 City & State

27 City & State

4. FEI Number  
59-1554808

Applied For  
Not Applicable

23 Zip Country

28 Zip Country

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

24 Zip Country

29 Zip Country

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DIREKTOR, KENNETH S.  
500 AUSTRALIAN AVE. SOUTH  
9TH FLOOR  
WEST PALM BEACH FL 33401

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DP  DELETE  
NAME ORMEROD, WILLIAM W  
STREET ADDRESS 1030 SUGAR SANDS BLVD  
CITY-ST-ZIP RIVIERA BEACH FL 33404

1.1 TITLE  Change  Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE DS  DELETE  
NAME APPLEBY, JEANNE  
STREET ADDRESS 1070 SUGAR SANDS BLVD  
CITY-ST-ZIP RIVIERA BEACH FL 33404

2.1 TITLE  Change  Addition  
2.2 NAME DS  
2.3 STREET ADDRESS FRANCOIS FRITSCHIE  
2.4 CITY-ST-ZIP 1050 SUGAR SANDS Blvd,  
RIVIERA BEACH, FL 33404

TITLE DVP  DELETE  
NAME PERDUE, RICHARD  
STREET ADDRESS 1160 SUGAR SANDS BLVD  
CITY-ST-ZIP RIVIERA BEACH FL 33404

3.1 TITLE  Change  Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE TD  DELETE  
NAME RASMUSSEN, JAY A  
STREET ADDRESS 1262 N SUGAR SANDS BLVD  
CITY-ST-ZIP RIVIERA BEACH FL 33404

4.1 TITLE  Change  Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE  Change  Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE  Change  Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE: *[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-19-99 561-844-5630  
Date Daytime Phone #

CR2E037 (1/198)