FILED Feb 16, 2004 8:00 am **Secretary of State**

2004	NO	NUAL		UKAI	ION

DOCUMENT #744501 1. Entity Name (*)
SAND DOLLAR SHORES CONDOMINIUM ASSOCIATION, 02-16-2004 90034 047 ****61.25 INC. Mailing Address Principal Place of Business 7420 S. OCEAN DR C115 7420 S. OCEAN DR. C115 JENSEN BEACH, FL 34957-2036 US JENSEN BEACH, FL 34957-2036 US 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite. Apt. #. etc. 01092004 CR2E037 (10/03) Cha-NP 4. FEI Number 59-2162318 Applied For City & State City & State Not Applicable \$8.75 Additional Country Zip Zip Country 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent ROSS, DEBORAH L (P.O. Box Number is Not Acceptable)

E. 05CEOLA S 401 E OSCEOLA ST. FIRST FLOOR RIVER OAK CENTER FIRST FLOOR-RIVEROAK STUART, FL 34994 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 Make check payable to Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Florida Department of State Trust Fund Contribution. Added to Fees ... Due by May 1, 2004 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. BRADY, JAMES Dr. #C-913 TITLE TITLE Delete NAME LEWIS, FISCHER NAME STREET ADDRESS 7420 S. OCEAN DR. C711 STREET ADDRESS JENSEN BEACH, FL 3+959 JENSEN BEACH, FL CITY-ST-ZP ☐ Delete TITLE SD TITLE HASSETT, ROBERT NAME BROWN, PHYLLIS NAME 7400 5 OCEAN DR, E-203 STREET ADDRESS STREET ADDRESS 7400 S OCEAN DR, E-502 SENSEN BEACH FL 34957 CITY-ST-ZIP JENSEN BEACH, FL CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE ROBB. TOM NAME NAME STREET ADDRESS 7430 S OCEAN DR B 318 STREET ADDRESS CITY-ST-ZIP JENSEN-BEACH, FL City-St-ZiP* ☐ Change ☐ Addition Delete DTGE TITLE NAME PORTANTE, RICHARD NAME STREET ADDRESS STREET ADDRESS 7410 S OCEAN DR D710 CITY-ST-7/P JENSEN BEACH, FL ☐ Change Addition ☐ Delete TITLE TITLE HUTCHISON, WILLIAM NAME NAME STREET ADDRESS STREET ADDRESS 7440 S OCEAN DRIVE C415 City-ST-ZIP CITY-ST-ZIP JENSEN BEACH, FL ☐ Change ☐ Addition TITLE ☐ Delete TITLE D SAGGESE, AL NAME NAME STREET ADORESS 7410 S OCEAN DR D 309 STREET ADDRESS CITY-ST-ZIP JENSEN BEACH, FL" 34957 CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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.

2-6-04 SIGNATURE: O OFFICER OR DIRECTOR