

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752847

FILED
Jan 08, 2009
Secretary of State

Entity Name: SUGAR BEACH TOWNHOME OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

8443 GULF BLVD. #D-18
NAVARRE BEACH, FL 32566

New Principal Place of Business:

Current Mailing Address:

8443 GULF BLVD. #D-18
NAVARRE BEACH, FL 32566

New Mailing Address:

FEI Number: 59-2130592

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WASYLIK, LOUIS A.
343 LULA BELLE LANE
FT. WALTON BEACH, FL 32548 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: MARTIN, SYLVIA
Address: 6509 RIVIERE DR.
City-St-Zip: PELL CITY, AL

Title: DT () Delete
Name: WASYLIK, LOUIS,
Address: 343 LULA BELLE LANE
City-St-Zip: FT. WALTON BEACH, FL

Title: DS () Delete
Name: WEIDLICH, H. EDWARD JR
Address: 516 SUNSET DR
City-St-Zip: BAY SAINT LOUIS, MS 39520

Title: D () Delete
Name: PLYMALE, BUTCH
Address: 8520 GULF BLVD 24
City-St-Zip: NAVARRE, FL 32566

Title: P () Delete
Name: BLIZZARD, FRANK
Address: 3212 CALLE DE CORTEZ
City-St-Zip: NAVARRE, FL 32566

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SYLVIA MARTIN

VP

01/08/2009

Electronic Signature of Signing Officer or Director

Date