


**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Mar 14, 2006 8:00 am
Secretary of State

03-14-2006 90020 003 ****61.25

DOCUMENT # 755014

1. Entity Name
STARBOARD LIGHT CONDOMINIUM ASSN., INC.



Principal Place of Business 2006 OCEAN SHORE BLVD ORMOND BEACH FL 32176 US	Mailing Address 2006 OCEAN SHORE BLVD 4172 ORMOND BEACH FL 32176 US
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2. Principal Place of Business	3. Mailing Address <i>2006 Ocean Shore Blvd</i>
Suite, Apt. #, etc.	Suite, Apt. #, etc. <i>Unit # 19</i>

1st MOORE CR2E037 (10/05)

City & State <i>Ormond Beach, Fl.</i>	4. FEI Number 59-2279929	Applied For Not Applicable
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Zip <i>32176</i>	Country <i>USA</i>	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

A1A TAX & BOOKKEEPING, INC
55 LONGWOOD DR
ORMOND BEACH, FL 32175

7. Name and Address of New Registered Agent

Name *Raymond Edwards*

Street Address (P.O. Box Number is Not Acceptable)
2006 Ocean Shore Blvd

Unit # 14

City *Ormond Beach* **FL** Zip Code *32176*

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 *Raymond Edwards* DATE *2-14-06*

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

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS RICHTER, JOAN 2006 OCEAN SHORE BLVD #17 ORMOND BEACH FL 32176	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DENNISON, ROBERTA B. 7820 BAYMEADOWS CIRCLE W JACKSONVILLE FL 32256	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MILLER, FRANK RD #1 BOX 750 COAL TOWNSHIP PA 17866	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST CARNICELLI, MATTHEW 6012 OAKRIDGE RD. AUBURN NY 13021	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Secretary</i> <i>Raymond Edwards</i> <i>2006 Ocean Shore Blvd</i> <i>Ormond Beach, Fl. 32176</i>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>President</i> <i>Roberta Dennison</i> <i>1916 King Shaker Way</i> <i>Poachedgl. Fl. 32455</i>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Treasurer</i> <i>Miller, Frank</i> <i>Rd #1, Box 750</i> <i>Coal Township, PA 17866</i>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Vice President</i> <i>Matthew Carnicelli</i> <i>6012 Oakridge Rd</i> <i>Auburn, NY 13021</i>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>D</i> <i>Lillian Hong</i> <i>2006 Ocean Shore Blvd # 13</i> <i>Ormond Beach, FL. 32176</i>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: *Raymond Edwards* DATE: *2-14-06*