

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755427

FILED
Apr 29, 2008
Secretary of State

Entity Name: SUNRISE BEACH CLUB ASSOCIATION, INC.

Current Principal Place of Business:

1212 NORTH ATLANTIC AVENUE
DAYTONA BEACH, FL 321183631

New Principal Place of Business:

Current Mailing Address:

1212 NORTH ATLANTIC AVENUE
DAYTONA BEACH, FL 321183631

New Mailing Address:

FEI Number: 59-2142786 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GOODWIN, MORRIS
150 DUNDEE RD
SUITE A
DAYTONA BEACH SHORE, FL 32118 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: P () Delete
Name: BANNON, JOHN
Address: ONE LIGUSTRUM CIRCLE
City-St-Zip: ORMOND BY THE SEA, FL 32176

Title: D () Delete
Name: LEINBOHM, PAUL
Address: 1321 MARDRAKE RD.
City-St-Zip: DAYTONA BEACH, FL 32114

Title: ST () Delete
Name: GOODWIN, MORRIS
Address: 150 DUNDEE RD., STE A
City-St-Zip: DAYTONA BEACH SHORE, FL

Title: D () Delete
Name: MATHEWS, SHIRLEY,
Address: 5835 NORDE DR., WEST
City-St-Zip: JACKSONVILLE, FL

Title: D () Delete
Name: SMITH, HENRY,
Address: 3720 N.W. 61 PLACE.
City-St-Zip: GAINESVILLE, FL

Title: V () Delete
Name: LARSON, SALLY
Address: 324 NW 48TH BLVD.
City-St-Zip: GAINESVILLE, FL 32607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: GOODWIN, MORRIS
Address: 150 DUNDEE RD., STE A
City-St-Zip: DAYTONA BEACH SHORE, FL

Title: VP (X) Change () Addition
Name: HIRSHON, WILMA
Address: 165 RIVERSIDE DR.
City-St-Zip: ORMOND BEACH, FL 32176

Title: D (X) Change () Addition
Name: SMITH, JO ANN
Address: 3410 N.W. 62ND PLACE
City-St-Zip: GAINESVILLE, FL 33653

Title: S (X) Change () Addition
Name: LARSON, SALLY
Address: 324 NW 48TH BLVD.
City-St-Zip: GAINESVILLE, FL 32607

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: MORRIS GOODWIN

Electronic Signature of Signing Officer or Director

T

04/29/2008

Date