
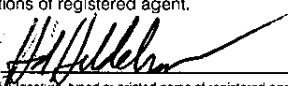
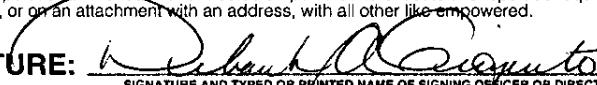


**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 05, 2004 8:00 am**  
**Secretary of State**

04-05-2004 90007 026 \*\*\*\*61.25

<b>DOCUMENT # 758993</b>					
1. Entity Name SILVER SANDS BEACH AND RACQUET CLUB CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 6500 SUNSET WAY ST PETERSBURG BEACH, FL 33706 US			Mailing Address 6595 SUNSET WAY ST PETERSBURG BEACH, FL 33706 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
BECKER & POLIAKOFF, P.A. 2400 WEST BAY DR STE 414 LARGO, FL 33770				Name: <u>COMMUNITY MANAGEMENT CONCEPTS, INC.</u> Street Address (P.O. Box Number is Not Acceptable) <u>4175 EAST BAY DRIVE, SUITE # 205</u> City <u>CLEARWATER</u> FL Zip Code <u>33764</u>	
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: 				DATE: <u>4-2-04</u>	
(NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	P	<input type="checkbox"/> Delete	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	BORSUM, ROBERT		BORSUM, ROBERT		
STREET ADDRESS	6595 SUNSET WAY		6500 SUNSET WAY		
CITY-ST-ZIP	ST. PETE BEACH, FL 33706		ST PETE BEACH, FL 33706		
TITLE	D	<input type="checkbox"/> Delete	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	GONZALEZ, JOE		GONZALEZ, JOE		
STREET ADDRESS	6595 SUNSET WAY		6500 SANSET WAY		
CITY-ST-ZIP	ST PETERSBURG BEACH, FL 33706		ST PETE BEACH, FL 33706		
TITLE	VP	<input type="checkbox"/> Delete	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	BALDWIN, CYNTHIA+		BALDWIN, CYNTHIA		
STREET ADDRESS	6595 SUNSET WAY		6500 SUNSET WAY		
CITY-ST-ZIP	ST. PETE BEACH, FL 33706		ST PETE BEACH, FL 33706		
TITLE	S	<input checked="" type="checkbox"/> Delete	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition	
NAME	NUSSER, GEORGETTE		QUICK, BOB		
STREET ADDRESS	6595 SUNSET WAY		6500 SUNSET WAY		
CITY-ST-ZIP	ST. PETE BEACH, FL 33706		ST. PETE BEACH, FL 33706		
TITLE	T	<input type="checkbox"/> Delete	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	ZETTEL, ROBERT				
STREET ADDRESS	6595 SUNSET WAY				
CITY-ST-ZIP	ST. PETE BEACH, FL 33706				
TITLE	D	<input checked="" type="checkbox"/> Delete	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition	
NAME	FRANGOS, EFFIE		GIAQUINTO, DEBORAH		
STREET ADDRESS	6595 SUNSET WAY		6500 SANSET WAY		
CITY-ST-ZIP	ST PETE BEACH, FL 33706		ST. PETE BEACH, FL 33706		
12. 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 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: 				DATE: <u>4-2-04</u>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				DATE	
				727-360-4706 Daytime Phone #	