## **FILED** Mar 31, 2008 8:00 am Secretary of State

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03-31-2008 90032 002 \*\*\*\*61.25 DOCUMENT #758993 SILVER SANDS BEACH AND RACQUET CLUB CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 1 A C 12 1 1 6595 SUNSET WAY 6500 SUNSET WAY ST PETERSBURG BEACH, FL 33706 ST PETERSBURG BEACH, FL 33706 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02212008 Chg-NP CR2E037 (12/06) 4. FEI Number 59-2095817 City & State City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Accord Name COMMUNITY MANAGEMENT CONCEPTS, INC. KIRK BLISS 4175 EAST BAY DR., STE 205 Street Address **CMC** CLEARWATER, FL 33764 4175 East Bay Dr., Suite 205 Clearwater, FL 33764 City 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. 3/10/08 SIGNATURE Signature, typed or printed name (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make check payable to Filing Fee Is \$61.25 \$5.00 May Be Florida Department of State Due by May 1, 2008 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Addition Change TITLE ☐ Delete TITLE Rick Fleck BORSUM, ROBERT NAME NAME 6500 Sunset Way 6500 SUNSET WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Saint Peters Burg 33706 CITY-ST-ZIP ST. PETE BEACH, FL 33706 Addition ☐ Change ☐ Delete TITLE TITLE & ሃ John Reinhard NUSSER, GEORGETTE NAME NAME STREET ADDRESS 6500 SUNSET WAY STREET ADDRESS CITY-ST-ZIP ST PETERSBURG BEACH, FL 33706 CITY-ST-ZIP TITLE Delete TITLE Lec Hemilton BALDWIN, CYNTHIA NAME NAME 6500 SUNSET WAY STREET ADDRESS 6500 JUNSET WAY STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ST. PETE BEACH, FL 33706 Delete TITLE TITLE SINNETT, MARY NAME NAME 6500 SUNSET WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ST. PETE BEACH, FL 33706 CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITLE ZETTEL. ROBERT NAME NAMÉ STREET ADDRESS STREET ADDRESS 6595 SUNSET WAY ST. PETE BEACH, FL 33706 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE TITLE ☐ Delete FRANGOS, EFFIE NAME NAME STREET ADDRESS STREET ADDRESS 6500 SUNSET WAY ST PETE BEACH, FL 33706 CRY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that I am an officer or direction 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 changed, or on an attachment with an address, with all other like empowered. SIGNATURE: