

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

**APPROVED AND FILED**

**95 APR 24 AM 8:31**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

<b>CORPORATION ANNUAL REPORT 1995</b>		<b>FLORIDA DEPARTMENT OF STATE</b> Sandra B. Murtham Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 759338 (7)**

1. Corporation Name  
**SANDY SHORES CONDOMINIUM ASSOCIATION, INC.**

Principal Place of Business <b>12824 GULF BOULEVARD MADERA BEACH FL 33708</b>	Mailing Address <b>12824 GULF BOULEVARD MADERA BEACH FL 33708</b>
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2. Principal Place of Business <b>21</b>	2a. Mailing Address <b>26</b>
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State <b>22</b>	City & State <b>27</b>
Zip <b>24</b>	Country <b>25</b>
Zip <b>29</b>	Country <b>30</b>

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified <b>07/27/1981</b>	3a. Date of Last Report <b>04/29/1994</b>
4. FEI Number <b>59-1982224</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$6.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input type="checkbox"/>	<b>\$68.75</b> Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**ZACUR, RICHARD A  
5200 CENTRAL AVENUE  
ST. PETERSBURG FL 33707**

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	<b>FL</b>
83	
84 City	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when re-registering) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>P</b>	NAME <b>MAIER, RICHARD</b>	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>14592 EL PASEO</b>	CITY-ST-ZIP <b>SEMINOLE FL</b>	1.2 NAME	
		1.3 STREET ADDRESS	
		1.4 CITY-ST-ZIP	
TITLE <b>VP</b>	NAME <b>PEDLEY, DAVID</b>	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>3810 5TH AVE NORTH</b>	CITY-ST-ZIP <b>ST PETERSBURG FL</b>	2.2 NAME	
		2.3 STREET ADDRESS	
		2.4 CITY-ST-ZIP	
TITLE <b>VP</b>	NAME <b>SILCOX, ERNEST</b>	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>1189 PHYLLIS AVE</b>	CITY-ST-ZIP <b>LARGO FL</b>	3.2 NAME	
		3.3 STREET ADDRESS	
		3.4 CITY-ST-ZIP	
TITLE <b>T</b>	NAME <b>SHEPPARD, DARREL</b>	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>1189 PHYLLIS AVE</b>	CITY-ST-ZIP <b>LARGO FL</b>	4.2 NAME	
		4.3 STREET ADDRESS	
		4.4 CITY-ST-ZIP	
TITLE <b>SD</b>	NAME <b>LOGAN, RICHARD</b>	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>12924 GULF BLVD / STE - 111</b>	CITY-ST-ZIP <b>MADERA BEACH FL</b>	5.2 NAME	
		5.3 STREET ADDRESS	
		5.4 CITY-ST-ZIP	
TITLE <b>D</b>	NAME <b>APPALE, JOSEPH</b>	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>1112 WEST RIVER DR</b>	CITY-ST-ZIP <b>TAMPA FL</b>	6.2 NAME	
		6.3 STREET ADDRESS	
		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **RICHARD LOGAN** *Richard Logan* Date: **4/19/95** Daytona Phone # **813-392-1281**

759338



**Sandy Shores Condominium Association, Inc.**

JOHN'S PASS VILLAGE

12224 GULF BOULEVARD • MADEIRA BEACH, FLORIDA 33708

JACK S. PEREZ D  
2812 WEST COMANCHE  
TAMPA, FL 33614