

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 759338

1. Entity Name

SANDY SHORES CONDOMINIUM ASSOCIATION, INC.

FILED
Feb 28, 2000 8:00 am
Secretary of State

02-28-2000 90006 005 ****61.25

Principal Place of Business 12924 GULF BOULEVARD MADEIRA BEACH FL 33708	Mailing Address 12924 GULF BOULEVARD MADEIRA BEACH FL 33708-2637
---	--



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

4. FEI Number 59-1982224	Applied For <input type="checkbox"/> Not Applicable
------------------------------------	--

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
---	---------------------------------------

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

Name _____
 Street Address (P.O. Box Number is Not Acceptable) _____
 City _____ **FL** Zip Code _____

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.

SIGNATURE _____ DATE _____
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.**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

T MCGAIL, RICHARD 143 SUMEC BEACONSFIELD, QUEBEC CA H9W- 1X7	<input type="checkbox"/> Delete
VP PEDLEY, DAVID 3810 5TH AVE NORTH ST PETERSBURG FL	<input type="checkbox"/> Delete
D SILCOX, ERNEST 106 DEER PARK TAMPA FL	<input type="checkbox"/> Delete
D GILLIE, THOMAS 6216 WADE ST LEESBURG FL 34748	<input type="checkbox"/> Delete
S LOGAN, RICHARD 12924 GULF BLVD / STE - 111 MADEIRA BEACH FL	<input type="checkbox"/> Delete
P APRILE, JOSEPH 1112 WEST RIVER DR TAMPA FL	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS CITY-ST-ZIP	
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS CITY-ST-ZIP	
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS CITY-ST-ZIP	
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS CITY-ST-ZIP	
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS CITY-ST-ZIP	

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 an officer like empowered.

SIGNATURE: *Richard A. Zacur*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/31/00 727 392-1281
 Date Daytime Phone #

CR2E037 (9/99)