

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 02, 2007  
Secretary of State**

DOCUMENT# 759637

Entity Name: SAND CASTLE BEACH CLUB ASSOCIATION, INC.

**Current Principal Place of Business:**

905 ESTERO BLVD.  
FT MYERS BCH, FL 33931

**New Principal Place of Business:**

**Current Mailing Address:**

905 ESTERO BLVD.  
FT MYERS BCH, FL 33931

**New Mailing Address:**

FEI Number: 59-2061501      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DAVIES, CHRISTOPHER N.  
12601 WORLD PLAZA LANE  
STE 2  
FT MYERS, FL 33907 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: TD ( ) Delete  
Name: ALEMAGHIDES, NICHOLAS  
Address: 6531 THICKET TRAIL  
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: PD ( ) Delete  
Name: LUPPINO, DOMENIC  
Address: 1050 S.W. 13TH PLACE  
City-St-Zip: BOCA RATON, FL 33486

Title: SD ( ) Delete  
Name: POVISIL, ANNA  
Address: 2823 SE 18TH AVE  
City-St-Zip: CAPE CORAL, FL 33904

Title: VD ( ) Delete  
Name: HARKEN, THOMAS  
Address: 18046 SAN CARLOS BLVD #138  
City-St-Zip: FORT MYERS BEACH, FL 33931

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VD (X) Change ( ) Addition  
Name: ALEMAGHIDES, NICHOLAS  
Address: 6531 THICKET TRAIL  
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: PD (X) Change ( ) Addition  
Name: HARKEN, THOMAS  
Address: 18046 SAN CARLOS BLVD  
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: TD (X) Change ( ) Addition  
Name: LEVAK, ALAN  
Address: 13100 SW 11TH CT C201  
City-St-Zip: PEMBROKE PINES, FL 33027

Title: SD (X) Change ( ) Addition  
Name: HAERTHER, LEROY  
Address: 1180 SW 14TH DR  
City-St-Zip: BOCA RATON, FL 33486

I hereby certify that the information supplied with this filing does not qualify for the 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: THOMAS HARKEN

PD

04/02/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date