

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003063

FILED
Jan 16, 2004
Secretary of State

Entity Name: DOLPHINS AT SUNRISE TOWNHOMES ASSOCIATION, INC.

Current Principal Place of Business:

10061 GULF BLVD
TREASURE ISLAND, FL 33706

New Principal Place of Business:

Current Mailing Address:

10061 GULF BLVD
TREASURE ISLAND, FL 33706

New Mailing Address:

FEI Number: 04-3656594 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

KING, DAVID
10061 GULF BLVD
TREASURE ISLAND, FL 33706

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: PD () Delete
Name: KING, DAVID
Address: 100 61 GULF BLVD
City-St-Zip: TREASURE ISLAND, FL 33706

Title: STD () Delete
Name: COVINGTON, JON
Address: 10071 GULF BLVD
City-St-Zip: TREASURE ISLAND, FL 33706

Title: D () Delete
Name: BYRNE, GAIL A
Address: 118-107TH AVENUE
City-St-Zip: TREASURE ISLAND, FL 33706

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DAVID KING

PD

01/16/2004

Electronic Signature of Signing Officer or Director

_____ Date