

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 27, 2004  
Secretary of State**

DOCUMENT# N04902

Entity Name: SUN BEACH CLUB CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

4232 S. ATLANTIC BLVD.  
NEW SMYRNA BEACH, FL 32169

**New Principal Place of Business:**

4232 S. ATLANTIC AVE  
NEW SMYRNA BEACH, FL 32169

**Current Mailing Address:**

4232 S. ATLANTIC BLVD.  
NEW SMYRNA BEACH, FL 32169

**New Mailing Address:**

4232 S. ATLANTIC AVE  
NEW SMYRNA BEACH, FL 32169

FEI Number: 59-2788462      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BISHOP, TERRY W.  
4232 SOUTH ATLANTIC DR.  
NEW SMYRNA BEACH, FL 32169

**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: P ( ) Delete  
Name: FREIDMAN, MICHAEL  
Address: 865 WINDOVER CT.  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: V ( ) Delete  
Name: DICKINSON, KEN  
Address: 4238 SUN VILLAGE CT  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: D ( ) Delete  
Name: MILLS, EILLEN MRS.  
Address: 424 CADDIE DRIVE  
City-St-Zip: DEBARY, FL 32713

Title: D ( ) Delete  
Name: WALLACE, WILLIAM  
Address: 4278 SUN VILLAGE CT  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: D ( ) Delete  
Name: BONAMO, JENNIFER  
Address: 896 BAY BREEZE CT  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: D ( ) Delete  
Name: MANN, JOHN  
Address: 868 BAY BREEZE  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

**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:

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

Title: D (X) Change ( ) Addition  
Name: PAQUETTE, MICHEL  
Address: 4226 SUNVILLAGE CT  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

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: MICHAEL FREIDMAN

P

04/27/2004

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

\_\_\_\_\_  
Date

JONATHAN CRUTCHFIELD D  
867 WINDOVE CT  
NEW SMYRNA BEACH, FL 32169