

**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 22, 2008  
Secretary of State**

DOCUMENT# N04902

Entity Name: SUN BEACH CLUB CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

4232 S. ATLANTIC AVE  
NEW SMYRNA BEACH, FL 32169

**New Principal Place of Business:**

**Current Mailing Address:**

4232 S. ATLANTIC AVE  
NEW SMYRNA BEACH, FL 32169

**New Mailing Address:**

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

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

SEALAND-FREET, ELLA M  
130 HIBISCUS RD  
EDGEWATER, FL 32141      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: P      ( ) Delete  
Name: MANN, JOHN  
Address: 868 BAY BREEZE WAY  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: VP      ( ) Delete  
Name: CRUTCHFIELD, JONATHON  
Address: 867 WINDOVER CT  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: T      ( ) Delete  
Name: MILLS, EILLEEN  
Address: 888 BAY BREEZE WAY  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: SEC      ( ) Delete  
Name: FLANIGAN, JEANNE  
Address: 4258 SUN VILLAGE COURT  
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:

I hereby certify that the information supplied with this filing does not qualify 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: JOHN MANN

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

PRES

01/22/2008

\_\_\_\_\_  
Date