

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N20919

**FILED**  
**Mar 19, 2012**  
**Secretary of State**

**Entity Name:** SILVER SANDS BEACH AND RACQUET CLUB MASTER ASSOCIATION, INC.

**Current Principal Place of Business:**

6595 SUNSET WAY  
ST PETE BEACH, FL 33706 US

**New Principal Place of Business:**

**Current Mailing Address:**

6595 SUNSET WAY  
ST PETE BEACH, FL 33706 US

**New Mailing Address:**

**FEI Number:** 59-2894954      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

COMMUNITY MANAGEMENT CONCEPTS, INC.  
4585 140TH AVE. NORTH SUITE 1012  
CLEARWATER, FL 33762 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  
Name: PYLE, BILL  
Address: 6600 SUNSET WAY  
City-St-Zip: SAINT PETERSBURG, FL 33706

Title: VP  
Name: STARK, ED  
Address: 6600 SUNSET WAY  
City-St-Zip: SAINT PETERSBURG, FL 33706

Title: S  
Name: DAVIS, BARRY  
Address: 6650 SUNSET WAY  
City-St-Zip: SAINT PETERSBURG, FL 33706

Title: T  
Name: BORSUM, BOB  
Address: 6500 SUNSET WAY  
City-St-Zip: SAINT PETERSBURG, FL 33706

Title: D  
Name: ANDERSON, PAT  
Address: 6500 SUNSET WAY  
City-St-Zip: ST PETERSBURG, FL 33706

Title: D  
Name: CADY, DUFF  
Address: 6500 SUNSET WAY  
City-St-Zip: ST PETERSBURG, FL 33706

I hereby 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 all other like empowered.

SIGNATURE: BILL PYLE

PD

03/19/2012

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

\_\_\_\_\_  
Date