

**2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Aug 03, 2011  
Secretary of State**

DOCUMENT# N41570

Entity Name: SUNNY SANDS RESIDENTS ASSOCIATION, INC.

**Current Principal Place of Business:**

523 CENTRAL BLVD  
PIERSON, FL 32180 US

**New Principal Place of Business:**

308 OAK STREET  
PIERSON, FL 32180 US

**Current Mailing Address:**

523 CENTRAL BLVD  
PIERSON, FL 32180 US

**New Mailing Address:**

308 OAK STREET  
PIERSON, FL 32180 US

FEI Number: 59-3054889

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

RUEHLMAN, GEORGE E  
523 CENTRAL BLVD  
PIERSON, FL 32180 US

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

ANDERSON, CALVIN  
308 OAK STREET  
PIERSON, FL 32180 US

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: CALVIN ANDERSON

08/03/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: ANDERSON, CALVIN  
Address: 308 OAK ST  
City-St-Zip: PIERSON, FL 32180

Title: DV  
Name: FRISTAD, MICHELLE  
Address: 415 PALM AVE  
City-St-Zip: PIERSON, FL 32180

Title: DT  
Name: HURLBURT, RUSSELL  
Address: 201 MELODIE LANE  
City-St-Zip: PIERSON, FL 32180

Title: DS  
Name: RICCIO, ART  
Address: 6646 BLACKWOOD DRIVE  
City-St-Zip: JACKSONVILLE, FL 32277

Title: D  
Name: PEKORA, MIKE  
Address: 102 RIDGE RD  
City-St-Zip: PIERSON, FL 32180

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: CALVIN ANDERSON

DP

08/03/2011

Electronic Signature of Signing Officer or Director

Date