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Apr 23 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **725761** (1)

1. Corporation Name

**SUGAR SANDS CONDOMINIUM ASSOCIATION INC**

Principal Place of Business

Mailing Address

**1241 SUGAR SANDS BLVD.  
RIVIERA BEACH FL 33404**

**1241 SUGAR SANDS BLVD.  
RIVIERA BEACH FL 33404**



3. Date Incorporated or Qualified

**03/09/1973**

4. FEI Number

**59-1554808**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00 May Be  
Added to Fees**

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

22 **1242 N. SUGAR SANDS BLVD.**

23 City & State

24 Zip

25 Country

26 Suite, Apt. #, etc.

27 **1242 N. SUGAR SANDS BLVD.**

28 City & State

29 Zip

30 Country

9. Name and Address of Current Registered Agent

**DIREKTOR, KENNETH S.  
500 AUSTRALIAN AVE. SOUTH  
9TH FLOOR  
WEST PALM BEACH FL 33401**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DP  
**RASMUSSEN, JAY A**  
**1262 SUGAR SANDS BLVD.**  
**RIVIERA BEACH FL 33404**

☒ DELETE

DS  
**SCHMIDT, MARILYN**  
**1190 SUGAR SANDS BLVD.**  
**RIVIERA BEACH FL 33404**

☒ DELETE

DVP  
**WOODLAND, ROMMEL J.**  
**1170 SUGAR SANDS BLVD.**  
**RIVIERA BEACH FL**

☒ DELETE

TD  
**O'NEILL, CHARLES C.**  
**1251 SUGAR SANDS BLVD**  
**RIVIERA BEACH FL**

☒ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ DELETE

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP

DP  
**William W. Ormerod**  
**1030 SUGAR SANDS BLVD.**  
**RIVIERA BEACH, FL. 33404**

☒ Change ☐ Addition

DS  
**JEANNE Appleby**  
**1070 SUGAR SANDS BLVD.**  
**RIVIERA BEACH, FL. 33404**

☒ Change ☐ Addition

DVP  
**Richard Perdue**  
**1160 SUGAR SANDS BLVD.**  
**RIVIERA BEACH, FL. 33404**

☒ Change ☐ Addition

TD  
**JAY A. RASMUSSEN**  
**1262 N. SUGAR SANDS BLVD.**  
**RIVIERA BEACH, FL. 33404**

☒ Change ☐ Addition

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Jay A. Rasmussen* Treas. 4-17-98

561-844-5630

CR2E037 (10/97)