

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000005118

**Entity Name:** ANASTASIA DUNES ASSOCIATION, INC.

**Current Principal Place of Business:**

461 A1A BEACH BLVD.  
ST. AUGUSTINE, FL 32080

**Current Mailing Address:**

461 A1A BEACH BLVD.  
ST. AUGUSTINE, FL 32080

**FEI Number:** 59-3743795

**Certificate of Status Desired:** No

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

LUMPKIN, ELLEN  
461 A1A BEACH BLVD.  
ST.AUGUSTINE, FL 32080 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY  
Name WENTZ, SUSAN E  
Address 321 OCEAN FOREST  
City-State-Zip: SAINT AUGUSTINE FL 32080

Title DIRECTOR  
Name LANG, DAN S  
Address 453 OCEAN FOREST DRIVE  
City-State-Zip: ST AUGUSTINE FL 32080

Title TREASURER  
Name RIFFE, JOSEPH R  
Address 1000 SEA FOREST DRIVE  
City-State-Zip: ST. AUGUSTINE FL 32080

Title DVP  
Name CAIN, RANDALL S  
Address 378 OCEAN FOREST DRIVE  
City-State-Zip: SAINT AUGUSTINE FL 32080

Title PRESIDENT  
Name WILCOX, JOHN  
Address 466 OCEAN FOREST DRIVE  
City-State-Zip: ST. AUGUSTINE FL 32080

Title DIRECTOR  
Name OLSON, KAREN  
Address 329 OCEAN FOREST DRIVE  
City-State-Zip: ST. AUGUSTINE FL 32080

Title DIRECTOR  
Name SPEARS, DAN  
Address 457 OCEAN FOREST DRIVE  
City-State-Zip: ST. AUGUSTINE FL 32080

*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:** SUSAN E. WENTZ

**SECRETARY**

**01/28/2014**

Electronic Signature of Signing Officer/Director Detail

Date