## 2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20919

Entity Name: SILVER SANDS BEACH AND RACQUET CLUB MASTER

ASSOCIATION, INC.

**Current Principal Place of Business:** 

6595 SUNSET WAY ST PETE BEACH, FL 33706

**Current Mailing Address:** 

6595 SUNSET WAY

ST PETE BEACH, FL 33706 US

FEI Number: 59-2894954 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COMMUNITY MANAGEMENT CONCEPTS, INC. 4585 140TH AVE. NORTH SUITE 1012 CLEARWATER, FL 33762 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

FILED Apr 12, 2013

**Secretary of State** 

CC9680392730

Officer/Director Detail:

 Title
 DIRECTOR
 Title
 TREASURER

 Name
 PYLE, BILL
 Name
 STARK, ED

Address 6600 SUNSET WAY Address 6600 SUNSET WAY

City-State-Zip: SAINT PETERSBURG FL 33706 City-State-Zip: SAINT PETERSBURG FL 33706

Title VP Title D

NameDAVIS, BARRYNameANDERSON, PATAddress6650 SUNSET WAYAddress6500 SUNSET WAY

City-State-Zip: SAINT PETERSBURG FL 33706 City-State-Zip: ST PETERSBURG FL 33706

Title PRESIDENT Title SECRETARY

NameBALDWIN, CYNTHIANameLANGFORD, LANCEAddress6500 SUNSET WAY #A209Address6500 SUNSET WAY #405City-State-Zip:ST. PETE BEACH FL 33706City-State-Zip:ST. PETE BEACH FL 33706

Title DIRECTOR Title DIRECTOR
Name BARCHFIELD, PETE Name LEACH, RON

Address 6500 SUNSET WAY #212 Address 6650 SUNSET WAY # C402
City-State-Zip: ST. PETE BEACH FL 33706 ST. PETE BEACH FL 33706

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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: CYNTHIA BALDWIN

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

04/12/2013

Date

## Officer/Director Detail Continued:

Title DIRECTOR
Name ROSE, BRAIN

Address 6600 SUNSET WAY # B221
City-State-Zip: ST. PETE BEACH FL 33706