

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N50613

**Entity Name:** SILVER SANDS BEACH & RACQUET CLUB THREE  
CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**6650 SUNSET WAY  
ST PETE BCH, FL 33706**Current Mailing Address:**6595 SUNSET WAY  
ST PETE BCH, FL 33706 US**FEI Number: 59-3139648****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

**Officer/Director Detail :**

Title	S
Name	MINNS, GEOFFREY
Address	6550 SUNSET WAY #420
City-State-Zip:	SAINT PETE BEACH FL 33706

Title	T
Name	DANIELSON, THOMAS
Address	6550 SUNSET WAY
City-State-Zip:	ST PETE BEACH FL 33706

Title	VP
Name	BARCHFELD, PETE
Address	6650 SUNSET WAY #212
City-State-Zip:	ST. PETE BEACH FL 33706

Title	DIRECTOR
Name	DAVIS, BARRY
Address	6650 SUNSET WAY #501
City-State-Zip:	ST. PETE BEACH FL 33706

Title	P
Name	HOWELL, KIRBY
Address	6595 SUNSET WAY
City-State-Zip:	SAINT PETERSBURG BEACH FL 33706

Title	DIRECTOR
Name	LEACH, RON
Address	6650 SUNSETWAY #402
City-State-Zip:	ST. PETE BEACH FL 33706

Title	DIRECTOR
Name	SINGLETON, SUSAN
Address	6650 SUNSET WAY #114
City-State-Zip:	ST. PETE BEACH 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: KIRBY HOWELL****PRESIDENT****03/14/2013**

Electronic Signature of Signing Officer/Director Detail

Date