

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Aug 24, 2009**  
**Secretary of State**

DOCUMENT# 721431

**Entity Name:** SAND CASTLE CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**1273 HIGHWAY A1A, #277  
SATELLITE BEACH, FL 32937**New Principal Place of Business:**1273 HIGHWAY A1A  
UNIT 277  
SATELLITE BEACH, FL 32937**Current Mailing Address:**1273 HIGHWAY A1A, #277  
SATELLITE BEACH, FL 32937**New Mailing Address:**1273 HIGHWAY A1A  
UNIT 277  
SATELLITE BEACH, FL 32937**FEI Number:** 59-1381781**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**FREEMAN, SHIRLEY  
1273 HIGHWAY A1A, #306  
SATELLITE BEACH, FL 32937 US**Name and Address of New Registered Agent:**BOYLE, JOE  
5966 BARN OWL COURT  
VIERA, FL 32955 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: JOE BOYLE

08/24/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: BOYLE, JOE  
Address: 5966 BARN OWL CT  
City-St-Zip: VIERA, FL 32955

Title: ST ( ) Delete  
Name: SCABAROZI, CINDY  
Address: 1273 HWY A1A, UNIT 305  
City-St-Zip: SATELLITE BEACH, FL 32937

Title: D ( ) Delete  
Name: GOSSELIN, ROGER  
Address: 19 CEDAR WOOD  
City-St-Zip: BILLERICA, MA 01821

Title: V ( ) Delete  
Name: DAFOE JR, CHARLES  
Address: 1273 HWY A1A #112  
City-St-Zip: SATELLITE BEACH, FL 32937

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOE BOYLE

P

08/24/2009

Electronic Signature of Signing Officer or Director

Date