2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728937

FILED Jan 30, 2009 Secretary of State

Entity Name: SAND CASTLE I ASSOCIATION, INC.

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
20000 GUL INDIAN SH	LF BLVD. HORES, FL 3378	35			
Current Mailing Address:			New Mailing Addr	New Mailing Address:	
C/O RICHARD C. COMMONS, P.A. 300 S DUNCAN AVE STE 220B CLEARWATER, FL 33755			901 N HERCULES :	C/O RICHARD C. COMMONS, P.A. 901 N HERCULES AVENUE SUITE A CLEARWATER, FL 33765	
FEI Number:	: 59-1561279	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of Cu	rrent Registered Agent:	Name and Address	s of New Registered Agent:	
NABORS, 706 SOUT TAMPA, FI	H LOIS AVENUE	Ē			
	named entity su e of Florida.	bmits this statement for the p	urpose of changing its registe	ered office or registered agent, or both,	
SIGNATUF	RE:				
	Electronic	Signature of Registered Age	nt	Date	
OFFICERS	S AND DIRECT	ORS:	ADDITIONS/CHAN	IGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	T () C FULLERTON, BAI 20000 GULF BLV INDIAN SHORES,	D #403	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P () D NABORS, DALE 706 SOUTH LOIS TAMPA, FL 3360		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (X) E KOELER, BARBA 10607 CARROLL TAMPA, FL 3361	BROOK LANE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (X) E BETLACH, VERNI 3557 CHAPPUIS FAIRBAULT, MN	TRAIL	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () C PAPEN, NANCY 19201 VISTA LAN INDIAN SHORES,		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () D BIENKOWSKI, DO 131 BEACH LANE CRYSTAL RIVER		Title: Name: Address: City-St-Zip:	()Change ()Addition	

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: RICHARD C. COMMONS CPA 01/30/2009