2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2007
Secretary of State

DOCUMENT# 728952

Entity Name: SUNNYSIDE BEACH PROPERTY OWNERS ASSOCIATION,INCORPORATED

Current Principal Place of Business:

101 SOUTH THREE NOTCH ST.
P.O. BOX 369
TROY, AL 36081

New Principal Place of Business:

101 SOUTH THREE NOTCH ST.
TROY, AL 36081

Current Mailing Address:

P.O. BOX 369
TROY, AL 36081

New Mailing Address:

FEI Number: 59-2456994 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CARDEN, CARL JR
21018 FRONT BEACH ROAD
PANAMA CITY, FL 32413 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: BOOTHE, ALAN C
Address: 203 LYNNWOOD ROAD
City-St-Zip: TROY, AL 36081

Title: V ( ) Delete
Name: STANLEY, JAMES F JR
Address: P.O. BOX 310066
City-St-Zip: ENTERPRISE, AL 36331

Title: SEC ( ) Delete
Name: SANFORD, WILLIAM D JR
Address: PO BOX 369
City-St-Zip: TROY, AL 36081

Title: T ( ) Delete
Name: BRUNSON, CATHY S
Address: 211 SHADOW LANE
City-St-Zip: TROY, AL 36079

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 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: WILLIAM D. SANFORD, JR. MR. 02/07/2007

Electronic Signature of Signing Officer or Director — Date