2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2008 8:00 am
Secretary of State
01-25-2008 90028 040 ****61.25

DOCUMENT # 737723

1. Entity Name
SLEEPY LAGOON PROPERTY OWNERS, INC.

Principal Place of Business	Mailing Address
PO BOX 372524 SATELLITE BEACH, FL 32937	PO BOX 372524 SATELLITE BEACH, FL 32937

01162008 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1743608 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SMITH, R.G.
445 RED SAIL WAY
SATELLITE BEACH, FL 32937

7. Name and Address of New Registered Agent

Name JAY S. SMITH
Street Address (P.O. Box Number is Not Acceptable)
476 SAILFISH COVE
City SATELLITE BEACH **FL** Zip Code 32937

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE [signature] JAY S. SMITH 1/22/08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P SMITH, R.G. 445 RED SAIL WAY SATELLITE BEACH, FL 32937	☒ Delete	PRESIDENT JAY SMITH 476 SAILFISH COVE SATELLITE BEACH, FL 32937	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T PEEDE, E. A. III 441 RED SAIL WAY SATELLITE BEACH, FL 32937	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PPD SCROSATI, GERALD 468 SAILFISH COVE SATELLITE BEACH, FL 32937	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V SCANNELL, MIKE 456 SAIL FISH COVE SATELLITE BEACH, FL 32937	☒ Delete	VICE PRESIDENT LIZ SHATTUCK 484 SAILFISH COVE SATELLITE BEACH, FL 32937	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S ZAJAC, POLLY 452 RED SAIL WAY SATELLITE BEACH, FL 32937	☒ Delete	SECRETARY NANCY CHMELIR 480 SAILFISH COVE SATELLITE BEACH, FL 32937	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] 1/22/08 321-799-6635
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #