

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 743175

**FILED**  
**Jan 21, 2010**  
**Secretary of State**

**Entity Name:** SEA DUNES STARFISH ASSOCIATION, INC.

**Current Principal Place of Business:**

4315 S. ATLANTIC AVENUE  
B-6  
NEW SMYRNA BEACH, FL 32169

**New Principal Place of Business:**

**Current Mailing Address:**

4315 S. ATLANTIC AVENUE  
B-6  
NEW SMYRNA BEACH, FL 32169

**New Mailing Address:**

**FEI Number:** 59-1932273

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

REILLY, SUSAN D.  
4315 S. ATLANTIC AVE., #B6  
NEW SMYRNA BEACH, FL 32169 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: DVP  
Name: SHEEHAN, JOHN H  
Address: 3045 TIMPANA POINT  
City-St-Zip: LONGWOOD, FL

Title: DS  
Name: REILLY, KATHERINE L  
Address: 215 71ST ST  
City-St-Zip: VIRGINIA BCH, FL 23451

Title: D  
Name: DOUDNEY, A C  
Address: 4315 S ATLANTIC AVE #2  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: P  
Name: REILLY, SUSAN R  
Address: 4315 SOUTH ATLANTIC AVE., #B-6  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

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: SUSAN D REILLY

PRES

01/21/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date