## 2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

## **Secretary of State** 03-01-2007 90015 028 \*\*\*\*61.25 **DOCUMENT #743601** THE SAND DOLLAR ASSOCIATION OF PENSACOLA. INC. MUSPOSI Principal Place of Business Mailing Address 336 FT. PICKENS RD. P.O. BOX 371 PENSACOLA BCH., FL 32561 GULF BREEZE, FL 32562 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01272007 Chg-NP CR2E037 (12/06) City & State City & State 4. FEI Number 59-1949345 Applied For Not Applicable Zip \$8.75 Additional Country Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ANDERSON, C. RONALD 528 W. GARDEN ST. STE 2 PENSACOLA, FL 32502 Pensarola Beach, Zip Code 325/01 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 **SIGNATURE** NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Filing Fee is \$61.25 Make check payable to \$5.00 May Be Trust Fund Contribution Florida Department of State Due by May 1, 2007 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN & 10. 11. ☐ Delete TITLE Addition PRINTY DENNIS NAME NAME 217 WINDERMERE CIR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PENSACOLA, FL 32503 CITY-ST-7IP Addition TITLE Delete TITLE ☐ Change Brenda Mc Mahon NAME BELONGER, ANN NAME 135 Ashley Forest Dr. STREET ADDRESS 336 FT PICKEN RD W101 STREET ADDRESS PENSACOLA BCH., FL 32561 CITY-ST-ZIP Fayetteville, GA 30214 CITY-ST-ZIP ST Delete TITLE TITLE Change Addition Steve Lones ANDERSON, RONALD NAME NAME P.O. BOX 583 STREET ADDRESS 2302 N 9TH AVE STREET ADDRESS Pensacola, FL 32591 CITY-ST-ZIP PENSACOLA, FL 32503 CITY-ST-ZIP ☐ Delete TITLE Change TITLE ☐ Addition KING, STEPHEN NAME NAME STREET ADDRESS 336 FT PICKENS RD E-105 STREET ADDRESS CITY-ST-ZIP GULF BREEZE, FL 32561 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE SIMMS, LINDA NAME NAME 336 FT PICKENS RD W-206 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PENSACOLA BEACH, FL 32561 CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE Change NAME HOWELL, JAMES NAME David Howell 1450 STEPHANIE CIR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CANTONMENT, FL 32533 CITY-ST-ZIP 12. Thereby 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 applicate 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 of 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 a yeard asset with all other like empowered.

Stellen
TED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED Mar 01, 2007 8:00 am