2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745807

FILED Apr 03, 2005 Secretary of State

Entity Name: SEA DUNES DOLPHIN ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

4325 S ATLANTIC AVE

В8

NEW SMYRNA BEACH, FL 32169 US

Current Mailing Address: New Mailing Address:

4325 S ATLANTIC AVE

В8

NEW SMYRNA BEACH, FL 32169 US

FEI Number: 59-1907061 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

PERROTTI, JOHN L 4325 S ATLANTIC AVE B8

NEW SMYRNA BEACH, FL 32169 US

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: VP () Delete Title: VPD (X) Change () Addition

 Name:
 HEWITT, CAREN
 Name:
 HEWITT, CAREN

 Address:
 1355 SPRING LAKE DR
 Address:
 1355 SPRING LAKE DR

 City-St-Zip:
 ORLANDO, FL 32804
 City-St-Zip:
 ORLANDO, FL 32804

Title: PD () Delete Title: PTD (X) Change () Addition

 Name:
 PERROTTI, JOHN
 Name:
 PERROTTI, JOHN

 Address:
 4325 S ATLANTIC AVE B8
 Address:
 4325 S ATLANTIC AVE B8

 City-St-Zip:
 NEW SMYRNA BEACH, FL 32169
 City-St-Zip:
 NEW SMYRNA BEACH, FL 32169

Title: SD () Delete Title: () Change () Addition

 Name:
 HEARD, LEE
 Name:

 Address:
 745 ALBA DR
 Address:

 City-St-Zip:
 ORLANDO, FL 32804
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOHN PERROTTI P 04/03/2005