## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## DOCK/MENT # 749568

Entity Name



FILED Mar 15, 2006 8:00 am Secretary of State

03-15-2006 90117 039 \*\*\*\*61.25

SUNSET BEACH CLUB CONDOMINIUM ASSOCIATION, INC.					03	15-2006 90.	117 039	01.23	
Principal Plac	ce of Business	Mailing Address	'+ '						
8615 E BAY DR #21 TREASURE ISLAND FL 33706		8615 E BAY DR #21 TREASURE ISLAND FL 33706							A
2. Principal Place of Business		3. Mailing Address			1 192/11 144	ii aliin ibisi sittii iili	#1 1815 61644 #1811 1	#1411 #1#11 #1#19 #14	INIEI SI (EZ)
Suite, Apt. #, etc.		Suite, Apt. #, etc.			1st MOORE CR2E037 (10/05)				
City & State		City & State			4. FEI Number				
Zip	Country	Zip	Country		5. Certificate of S	Status Desired		\$8.75 Add	ditional
	6. Name and Address of Current	Registered Agent			7. Name and Ad	dress of New	Registered .		
Na				an E. Changar					
DOUYARD, ROGER J. 1755 EMERALD DR N			Street Addr		O. Box Number is		le) <b>૮</b> _		
CLE	EARWATER FL 34616	Ta		200		3629			
			City	ampo	7, 3,		FL	Zip Cod	le
	e named entity submits this statement fo	r the purpose of changing its	registered office or	registere	ed agent, or both, in	n the State of F	lorida. I am	familiar with,	and accept
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NOTE	Registered Agent signal.	rus tectorisq i	when reinstating)		DATE	•	
								e.*	1 1 19 1 12 1
	FILE NOW: FEE IS \$61.25 Due By May 1, 2006	9. Election Cam Trust Fund C	paign Financing ontribution.		\$5.00 May Be Added to Fees			k Payable tment of S	
10.	Due By May 1, 2006  OFFICERS AND DIF	Trust Fund C				Flor	ida Depar	tment of S	State
10. ΠΤ <b>L</b> E	OFFICERS AND DIF	Trust Fund C	Ontribution.		Added to Fees	Flor	ida Depar	tment of S	State
10. TITLE NAME	OFFICERS AND DIF PD DOUYARD, ROGER J.	Trust Fund C	Ontribution.  11.  TITLE  NAME		Added to Fees	Flor	ida Depar	RECTORS IN	State
10. ΠΤ <b>L</b> E	OFFICERS AND DIF	Trust Fund C	Ontribution.		Added to Fees	Flor	ida Depar	RECTORS IN	State
10. TITLE NAME STREET ADDRESS	OFFICERS AND DIF PD DOUYARD, ROGER J. 1755 EMERALD DR N	Trust Fund C	11. TITLE NAME STREET ADDRESS		Added to Fees	Flor	ida Depar	RECTORS IN	State
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

monte 1) AN CHANGAR

2-25-06

(815) 431-3201