2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#750718

FILED Jan 30, 2009 Secretary of State

Entity Name: SAND CASTLE III CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 20040 GULF BLVD INDIAN SHORES, FL 33785 US **Current Mailing Address: New Mailing Address:** C/O RICHARD C. COMMONS, P.A. C/O RICHARD C. COMMONS, P.A. 300 S. DUNCAN AVE., SUITE 2208 901 N HERCULES AVENUE SUITE A CLEARWATER, FL 33755 CLEARWATER, FL 33765 FEI Number: 59-2383468 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: FRASER, CHARLES 20040 GULF BLVD #602 INDIAN ROCKS BEACH, FL 33785 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: () Delete () Change () Addition FRASER, CHARLES Name: Name: 20040 GULF BLVD., #602 Address: Address: City-St-Zip: INDIAN ROCKS BEACH, FL 33785 City-St-Zip: Title: () Delete Title: (X) Change () Addition COLLINS, JOHN Name: COLLINS, JOHN Name: Address: 10312 MYSTIC MEADOW WAY Address: 10312 MYSTIC MEADOW WAY City-St-Zip: OAKTON, VA 22124 City-St-Zip: OAKTON, VA 22124 Title: () Delete Title: () Change () Addition GIBSON, PETER Name: Name: 2040 LARCHMONT NORTH Address: Address: City-St-Zip: CLEARWATER, FL 33764 City-St-Zip: Title: (X) Delete Title: () Change () Addition Name: MCCORMICK, JIM Name: Address: 4926 TOWNSHIP TRACE Address: City-St-Zip: MARIETTA, GA 30066 City-St-Zip: Title: Title: () Delete () Change () Addition PLUMLEE, PAT Name: Name: 417 FIRST STREET Address: Address: INDIAN ROCKS BEACH, FL 33785 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: RICHARD C. COMMONS CPA 01/30/2009