## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

751046

(4)

SANDY SHORES CONDOMINIUM A BEACH SHORES, FLORIDA, INC.	ASSOCIATION OF DAY								
Principal Place of Business	Mailing Address								
3159 SOUTH ATLANTIC AVENUE DAYTONA BEACH SHORES FL 32118	3159 SOUTH ATLANTIC AVENUE DAYTONA BEACH SHORES FL 32118			3. Date Incorporated or Qualified 02/14/1980					
					4. FEI Number	Applied For			
					59-2264752 Not Applicable				
2. Principal Place of Business 21	2a. Mailing Address 26			5. Certificate of Status Desired   \$8.75 Additional Fee Required					
Suite, Apt. #, etc. Suite, Apt. #, e		tc.			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
City & State	City & State				7. Is this nonprofit corporation a homeowners association?  X Yes \( \subseteq \text{No} \)				
Zip Country 25	Zip 29	Country			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.				
9. Name and Address of Current	10. Name and Address of New Registered Agent								
			81	Name					
ISAAC, RONALD H. 3159 SOUTH ATLANTIC AVENUE DAYTONA BEACH SHORES FL 32118			82	Street Addre	reet Address (P.O. Box Number is Not Acceptable)				
			83						
			84		FL	85 Zip Code			
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.									
SIGNATURE									
Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12									
			TI F						

11. Pursuant to the provisions of Sections 617.0502 and 617.0508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.											
SIGNATURE Signature, typed or printed name of registered agent and lifle if applicable (NOTE: Registered Agent algorature required when reinstating)  DATE  DATE											
Signature. Typed or printed name of registered agent and this if applicable (NOTE: F			13.		TO OFFICERS AND DIRECTOR	2S IN 12					
TITLE	PD	DELETE	1.1 TITLE	7100111010101010101010	Change	Addition					
NAME	ISAAC, RONALD H.		1.2 NAME								
STREET ADDRESS	3159 S. ATLANTIC AVE.		1.3 STREET ADDRESS								
CITY-ST-ZIP	DAYTONA BCH SHS FL		1.4 CITY-ST-ZIP								
TITLE	VD	DELETE	2.1 TITLE		Change	Addition					
NAME	SLONEKER, DONALD		2.2 NAME								
STREET ADDRESS	3159 S. ATLANTIC AVE.		2.3 STREET ADDRESS		er er						
CITY-ST-ZIP	DAYTONA BCH SHRS FL		2. 4 CITY-ST-ZIP								
TITLE	DS	DELETE	3.1 TITLE		☐ Change	☐ Addition					
NAME	WARD, JAMES E.		3.2 NAME								
STREET ADDRESS	3159 S. ATLANTIC AVE.		3.3 STREET ADDRESS			ł					
CITY-ST-ZIP	DAYTONA BEACH SHORES FL		3.4. CITY - ST - ZIP		•						
TITLE	TD	DELETE	4.1 TITLE		☐ Change	Addition					
NAME	wheeler, ralph N.		4.2 NAME			İ					
STREET ADDRESS	3159 S. ATLANTIC AVE.		4.3 STREET ADDRESS		*.	ļ					
CITY-ST-ZIP	DAYTONA BCH SHRS FL		4.4 CITY-ST-ZIP								
TITLE	D	DELETE	5.1 TITLE		Change	☐ Addition					
NAME	Layman, Buddy		5.2 NAME			1					
STREET ADDRESS	3159 S. ATLANTIC AVE.		5.3 STREET ADDRESS								
CITY-ST-ZIP	DAYTONA BEACH SHORES FL		5.4 CITY-ST-ZIP		· ·						
TITLE		DELETE	6.1 TITLE		Change	Addition					
NAME			6.2 NAME								
STREET ADDRESS			6.3 STREET ADDRESS								
CITY-ST-ZIP			6.4 CITY-ST-ZIP								

14. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplishental annual 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 truety even the corporation or the receiver or truety even the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or truety even the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or truety.

SIGNATURE:

3/29/98

904/767-7631

**FILED** 

Apr 14 1998 8:00am

Secretary of State

CR2E037 (10/97)