2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2007
Secretary of State

DOCUMENT# 751046

Entity Name: SANDY SHORES CONDOMINIUM ASSOCIATION OF DAYTONA BEACH SHORES, FLORIDA, INC.

Current Principal Place of Business:

5910 TRAILWOOD DRIVE
PORT ORANGE, FL 32127

New Principal Place of Business:

458 MERRIMAC DR
PORT ORANGE, FL 32127

Current Mailing Address:

5910 TRAILWOOD DRIVE
PORT ORANGE, FL 32127

New Mailing Address:

458 MERRIMAC DR.
PORT ORANGE, FL 32127

FEI Number: 59-2264752 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BURNS, CATHIE
455 MERRIMAC DR
PORT ORANGE, FL 32127 US

Name and Address of New Registered Agent:

BURNS, CATHIE
458 MERRIMAC DR.
PORT ORANGE, FL 32127 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: _____ 02/12/2007
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P,D ( ) Delete
Name: WARD, SHARRON
Address: 5910 TRAILWOOD DRIVE
City-St-Zip: PORT ORANGE, FL 32127

Title: T,D ( ) Delete
Name: BURNS, CATHIE
Address: 455 MERRIMAC DRIVE
City-St-Zip: PORT ORANGE, FL 32127

Title: S,D ( ) Delete
Name: GORE, ALICE
Address: 3912 ROSE PETAL LANE
City-St-Zip: ORLANDO, FL 32808

Title: VP,D ( ) Delete
Name: TATE, WAYNE
Address: 3720 S. LAKE ORLANDO PARKWAY
City-St-Zip: ORLANDO, FL 32808

Title: D ( ) Delete
Name: THOMPSON, ADRIAN
Address: 6 DORADO BEACH ROAD
City-St-Zip: ORMOND BEACH, FL 32174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: T,D (X) Change ( ) Addition
Name: BURNS, CATHIE
Address: 458 MERRIMAC DR.
City-St-Zip: PORT ORANGE, FL 32127

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: SHARRON WARD P.D. 02/12/2007
Electronic Signature of Signing Officer or Director — Date