

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751256

FILED
Mar 04, 2007
Secretary of State

Entity Name: CANAVERAL SANDS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

8494-96-98-8500 RIDGEWOOD
CAPE CANAVERAL, FL 32920 US

New Principal Place of Business:

Current Mailing Address:

CANAVERAL SANDS
%RECON. DIFFERENCES, 109 LONG PT RD.
CAPE CANAVERAL, FL 32920 US

New Mailing Address:

CANAVERAL SANDS C/O RDI
109 LONG POINT ROAD.
CAPE CANAVERAL, FL 32920 US

FEI Number: 59-2226215

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUGAN, MICHELLE
%RECONCILABLE DIFFERENCES
109 LONG POINT RD.
CAPE CANAVERAL, FL 32920 US

Name and Address of New Registered Agent:

DUGAN, MICHELLE
C/O RECONCILABLE DIFFERENCES
109 LONG POINT RD.
CAPE CANAVERAL, FL 32920 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:

03/04/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SMALLY, ED
Address: 8500 RIDGEWOOD #506
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: VPD () Delete
Name: BEAUMONT, JERROLD
Address: 8494 RIDGEWOOD AVE #4201
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: D () Delete
Name: MCPEEK, BARBARA
Address: 8500 RIDGEWOOD AVE 106
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: SD () Delete
Name: DECK, JEAN
Address: 8494 RIDGEWOOD AVE # 4205
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPD (X) Change () Addition
Name: ANDERSON, CHRISTINE
Address: 8496 RIDGEWOOD AVE #3506
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: D (X) Change () Addition
Name: MCPEEK, BARBARA
Address: 8500 RIDGEWOOD AVE #106
City-St-Zip: CAPE CANAVERAL, FL 32920

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

Title: T () Change (X) Addition
Name: FLETCHER, HAROLD
Address: 8500 RIDGEWOOD AVE #203
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: D () Change (X) Addition
Name: BURKE, GERALD
Address: 8500 RIDGEWOOD AVE #101
City-St-Zip: CAPE CANAVERAL, FL 32920

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: EDWIN SMALLY

PRES

03/04/2007

Electronic Signature of Signing Officer or Director

Date