

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751975

FILED
Jan 27, 2009
Secretary of State

Entity Name: SAND AND SEA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2505 TAMARIND DRIVE
C
FT. PIERCE, FL 33449

New Principal Place of Business:

2505 TAMARIND DRIVE
C
FT. PIERCE, FL 34949

Current Mailing Address:

2505 TAMARIND DRIVE
C
FT. PIERCE, FL 33449

New Mailing Address:

2505 TAMARIND DR
C
FT. PIERCE, FL 34949

FEI Number: 59-2034519

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MUNMROE, LORRAINE
2505 TOMERIND DR #C
FORT PIERCE, FL 34949 US

Name and Address of New Registered Agent:

MUNROE, LORRAINE
2505 TAMARIND DR #C
FORT PIERCE, FL 34949 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: JOAN KEYES

01/27/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JAMES, KEYES
Address: 11599 WINDSEPT CIR
City-St-Zip: ADAMS, NY 13605

Title: T () Delete
Name: KEYES, JOAN
Address: 11599 WINDSWEPT CIR
City-St-Zip: ADAMS, NY 13605

Title: T () Delete
Name: MUNROE, LORRAINE
Address: 2505 TAMATINO DR APT C
City-St-Zip: FT. PIERCE, FL 34949

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: JAMES, KEYES
Address: 11599 WINDSWEPT CIR
City-St-Zip: ADAMS, NY 13605

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

Title: T (X) Change () Addition
Name: MUNROE, LORRAINE
Address: 2505 TAMARIND DR APT C
City-St-Zip: FT. PIERCE, FL 34949

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: JOAN KEYES

T

01/27/2009

Electronic Signature of Signing Officer or Director

Date