## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **FILED** Feb 10, 2005 8:00 am Secretary of State

DOCUMEN I # 752176  1. Entity Name THE SUGAR MILL ASSOCIATION, INC.						02-10-2005 90051	044 ****	61.25
Principal Place of Business 100 CLUBHOUSE CIRCLE NEW SMYRNA BEACH, FL 32168 US Mailing Address 100 CLUBHOUSE CIRCLE NEW SMYRNA BEACH, FL 32168 US NEW SMYRNA BEACH, FL 321				68 US	1 (23)(1 1831			
Principal Place of Business     3. Mailing Address				<del>)</del>				
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01312005	Chg-NP CR2E	037 (10/03)	
City & State		City & State			4. FEI Number 59-20572	 217	. — —	plied For
Zip	Country	Zip Cou		intry	5. Certificate of Status Desired   \$8.75 Additional Fee Required			
	6. Name and Address of Current I	Registered Agent			7. Name and A	ddress of New Registered	l Agent	
PETERSON, JR, SID C				Name				
418 CANAL STREET NEW SMYRNA BCH, FL 32168				Street Address (P.O. Box Number is Not Acceptable)				
	·			City			Zip Cod	e
				·		F	<u> </u>	
	named entity submits this statement fo ions of registered agent.	r the purpose of changing it	s register	ed office or registe	ered agent, or both,	, in the State of Florida. I ar	n familiar with,	and accept
SIGNATURE.	The second secon			·····	•		· · ·	
į.	Signature, typed or printed name of registered agent	and title if applicable. (NC	ITE: Registere	d Agent signature requir	ed when reinstating)	DATE		
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10.	Filing Fee is \$61.25 Due by May 1, 2005 OFFICERS AND DIR	9. Election Ca Trust Fund	ampaign F	inancing ion.	\$5.00 May Be Added to Fees	Make che Florida Dep	ck payable t	tate
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption state.

certify that the information indicated on this report or supplemental 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 trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNATURE OF DIRECTOR

Date