

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Jun 05, 2007 8:00 am**  
**Secretary of State**

06-05-2007 90012 048 \*\*\*\*61.25

**DOCUMENT # 755014**

1. Entity Name

STARBOARD LIGHT CONDOMINIUM ASSN., INC.



Principal Place of Business

2006 OCEAN SHORE BLVD  
ORMOND BEACH FL 32176  
US

Mailing Address

2006 OCEAN SHORE BLVD  
UNIT 19  
ORMOND BEACH FL 32176  
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2279929

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

1st MOORE

CR2E037 (10/06)

6. Name and Address of Current Registered Agent

EDWARDS, RAYMOND  
2006 OCEAN SHORE BLVD  
UNIT 14  
ORMOND BEACH FL 32176

7. Name and Address of New Registered Agent

Name

DEBORAH KREINEST

Street Address (P.O. Box Number is Not Acceptable)

2006 Ocean Shore BLVD #19

City

ORMOND BEACH

FL

Zip Code

32176

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Deborah Kreinest*

DEBORAH KREINEST

3/26/07

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when registering)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

NAME S  
EDWARDS, RAYMOND  
STREET ADDRESS 2006 OCEAN SHORE BLVD  
CITY ST ZIP ORMOND BEACH FL 32176 ☒ Delete

NAME P  
DENNISON, ROBERTA B.  
STREET ADDRESS 1016 KING DEAKER WAY  
CITY ST ZIP ROCKLEDGE FL 32955 ☐ Delete

NAME T  
MILLER, FRANK  
STREET ADDRESS RD #1 BOX 750  
CITY ST ZIP COAL TOWNSHIP PA 17866 ☐ Delete

NAME VP  
CARNICELLI, MATTHEW  
STREET ADDRESS 6012 OAKRIDGE RD.  
CITY ST ZIP AUBURN NY 13021 ☒ Delete

NAME D  
LONG, LILLIAN  
STREET ADDRESS 2006 OCEANSHORE BLVD., #13  
CITY ST ZIP ORMOND BEACH FL 32176 ☒ Delete

NAME ☐ Delete  
STREET ADDRESS  
CITY ST ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

NAME S  
BRENDA HUTCHINS  
STREET ADDRESS 2006 OCEAN SHORE BLVD #8  
CITY ST ZIP ORMOND BEACH, FL 32176 ☐ Change ☐ Addition

NAME VICE PRESIDENT  
ROBERTA B. DENNISON  
STREET ADDRESS 1016 KINGFISHER WAY  
CITY ST ZIP ROCKLEDGE, FL 32935 ☒ Change ☐ Addition

NAME T.  
FRANK MILLER  
STREET ADDRESS RD #1 BOX 750  
CITY ST ZIP COAL, TOWNSHIP, PA 17866 ☐ Change ☐ Addition

NAME P  
J. WENDELL AGEE  
STREET ADDRESS 505 N. COUNTRY CLUB RD  
CITY ST ZIP LAKE NARY, FL 32746 ☒ Change ☐ Addition

NAME D  
SUNDAY GELUNAS  
STREET ADDRESS 3800 W. NEW HIGHWAY  
CITY ST ZIP FRANKLIN, TN 37064 ☒ Change ☐ Addition

NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY ST ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further 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:

*Roberta B. Dennison*

ROBERTA B. DENNISON

3/26/07

321-631-8441

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #