2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# 758827

Entity Name: SANDCASTLE BEACH HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

8522 GULF BLVD.
NAVARRE BEACH, FL 32566

New Principal Place of Business:

Current Mailing Address:

1804 PRADO STREET
NAVARRE BEACH, FL 32566

New Mailing Address:

FEI Number: 59-2502643 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SLYE, DOROTHY
1804 PRADO ST
NAVARRE BEACH, FL 32566 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: S ( ) Delete
Name: O'ROURKE, DONALD
Address: 8522 GULF BLVD #22
City-St-Zip: NAVARRE, FL 32566

Title: D ( ) Delete
Name: BRYANT, TIM
Address: 8522 GULF BLVD. #17
City-St-Zip: NAVARRE, FL 32566

Title: D ( ) Delete
Name: CHATWELL, JIMMY
Address: 8522 GULF BLVD. #43
City-St-Zip: NAVARRE, FL 32566

Title: VP ( ) Delete
Name: BLAIS, ROBERT
Address: 8522 GULF BLVD. #11
City-St-Zip: NAVARRE, FL 32566

Title: P ( ) Delete
Name: BRADSHAW, ROBERT
Address: 8522 GULF BLVD. #44
City-St-Zip: NAVARRE, FL 32566

Title: T ( ) Delete
Name: HICKS, RICHARD
Address: 8522 GULF BLVD. #39
City-St-Zip: NAVARRE, FL 32566

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change ( ) Addition
Name: CARTER, DON
Address: 8522 GULF BLVD #45
City-St-Zip: NAVARRE, FL 32566

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

Title: SEC (X) Change ( ) Addition
Name: BRAKE, BONNIE
Address: 8522 GULF BLVD. #19
City-St-Zip: NAVARRE, FL 32566

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

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

Title: D (X) Change ( ) Addition
Name: HICKS, RICHARD
Address: 8522 GULF BLVD. #39
City-St-Zip: NAVARRE, FL 32566

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: DOROTHY SLYE RA 04/29/2009

Electronic Signature of Signing Officer or Director — Date