## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 759637** 

FILED Apr 02, 2007 Secretary of State

Entity Name: SAND CASTLE BEACH CLUB ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

905 ESTERO BLVD. FT MYERS BCH, FL 33931

Current Mailing Address: New Mailing Address:

905 ESTERO BLVD. FT MYERS BCH, FL 33931

FEI Number: 59-2061501 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DAVIES, CHRISTOPHER N. 12601 WORLD PLAZA LANE STE 2 FT MYERS, FL 33907 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:

- Flateria Circulus d'Arad

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD () Delete Title: VD (X) Change () Addition Name: ALEMAGHIDES, NICHOLAS Name: ALEMAGHIDES, NICHOLAS Address: 6531 THICKET TRAIL Address: 6531 THICKET TRAIL
City-St-Zip: NEW PORT RICHEY, FL 34653 City-St-Zip: NEW PORT RICHEY, FL 34653

Title: PD () Delete Title: (X) Change ( ) Addition LUPPINO, DOMENIC Name: HARKEN, THOMAS Name: Address: 1050 S.W. 13TH PLACE Address: 18046 SAN CARLOS BLVD City-St-Zip: BOCA RATON, FL 33486 City-St-Zip: FORT MYERS BEACH, FL 33931

Title: SD ( ) Delete Title: TD (X) Change ( ) Addition Name: POVISIL, ANNA Name: LEVAK, ALAN

 Address:
 2823 SE 18TH AVE
 Address:
 13100 SW 11TH CT C201

 City-St-Zip:
 CAPE CORAL, FL 33904
 City-St-Zip:
 PEMBROKE PINES, FL 33027

Title: VD ( ) Delete Title: SD (X) Change ( ) Addition

 Name:
 HARKEN, THOMAS
 Name:
 HAERTHER, LEROY

 Address:
 18046 SAN CARLOS BLVD #138
 Address:
 1180 SW 14TH DR

 City-St-Zip:
 FORT MYERS BEACH, FL 33931
 City-St-Zip:
 BOCA RATON, FL 33486

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: THOMAS HARKEN PD 04/02/2007