

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005012

FILED
Apr 29, 2006
Secretary of State

Entity Name: SANDY DUNES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

1947 JO-TAM LANE
NAVARRE, FL 32566

New Principal Place of Business:

1919 JO TAM LANE | | | NAVARRE
NAVARRE, FL 32566

Current Mailing Address:

1947 JO-TAM LANE
NAVARRE, FL 32566

New Mailing Address:

PO BOX 5885
NAVARRE, FL 32566

FEI Number: 59-3668287

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRUENWALD, STEPHEN M
1947 JO TAM LANE
NAVARRE, FL 32566 US

Name and Address of New Registered Agent:

MEYER, ERICA L RA
1919 JO TAM LANE | | | NAVARRE
NAVARRE, FL 32566 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: ERICA L MEYER

04/29/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WALDO, DONALD
Address: 1931 JO TAM LANE
City-St-Zip: NAVARRE, FL 32566

Title: VD () Delete
Name: MAINES, DENNIS
Address: 1960 JO TAM LANE
City-St-Zip: NAVARRE, FL 32566

Title: TD () Delete
Name: GRUENWALD, STEPHEN
Address: 1947 JO TAM LANE
City-St-Zip: GULF BREEZE, FL 32566

Title: SD () Delete
Name: MEYER, ERICA
Address: 1919 JO TAM LANE
City-St-Zip: NAVARRE, FL 32566

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GARCIA, LORENZO
Address: 1956 JO TAM LANE
City-St-Zip: NAVARRE, FL 32566

Title: VD (X) Change () Addition
Name: SAMPLES, CARL
Address: 1959 JO TAM LANE
City-St-Zip: NAVARRE, FL 32566

Title: TD (X) Change () Addition
Name: MEYER, JOSEPH
Address: 1919 JO TAM LANE NAVARRE
City-St-Zip: GULF BREEZE, FL 32566

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

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: JOSEPH MEYER

TD

04/29/2006

Electronic Signature of Signing Officer or Director

Date