## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000005118

FILED Jaņ 06, 2<u>01</u>0 Secretary of State

Entity Name: ANASTASIA DUNES ASSOCIATION, INC.

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

461 A1A BEACH BLVD. ST. AUGUSTINE, FL 32080

**Current Mailing Address: New Mailing Address:** 

461 A1A BEACH BLVD. ST. AUGUSTINE, FL 32080

FEI Number: 59-3743795 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:

JACOBS, PHILIP H 461 A1A BEACH BLVD. ST.AUGUSTINE, FL 32080

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:

Electronic Signature of Registered Agent Date

**OFFICERS AND DIRECTORS:** 

PALMER, MICHAEL Name: Address: 119 S WIND CIR

City-St-Zip: SAINT AUGUSTINE, FL 32080

Title:

Name: ELLEN AVERY, SMITH Address: 415 OCEAN FOREST DR. City-St-Zip: ST. AUGUSTINE, FL 32080

Title: DP

LANG, DAN Name:

453 OCEAN FOREST DR Address: City-St-Zip: ST AUGUSTINE, FL 32080

Title: DS

Name: PLATTAS, COLETTE Address: 300 OCEAN FOREST DR City-St-Zip: ST. AUGUSTINE, FL 32080

DVP Title:

VAUGHTERS, HOWARD Name: 422 OCEAN FOREST DR #2 Address: City-St-Zip: SAINT AUGUSTINE, FL 32080

I hereby 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 all other like empowered.

SIGNATURE: DAN LANG **PRES** 01/06/2010