2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003063

FILED Apr 27, 2005 Secretary of State

Entity Name: DOLPHINS AT SUNRISE TOWNHOMES ASSOCIATION, INC.

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

10061 GULF BLVD 10065 GULF BLVD

TREASURE ISLAND, FL 33706 TREASURE ISLAND, FL 33706

Current Mailing Address: New Mailing Address:

10061 GULF BLVD 10065 GULF BLVD

TREASURE ISLAND, FL 33706 TREASURE ISLAND, FL 33706

FEI Number: 04-3656594 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:

KING, DAVID

BYERS, WARREN

10061 GULF BLVD

10069 GULF BLVD

TREASURE ISLAND, FL 33706 US TREASURE ISLAND, FL 33706 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: WARREN BYERS 04/27/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

e: PD () Delete Title: P (X) Change () Addition

 Name:
 KING, DAVID
 Name:
 BYERS, WARREN

 Address:
 100 61 GULF BLVD
 Address:
 100 69 GULF BLVD

City-St-Zip: TREASURE ISLAND, FL 33706 City-St-Zip: TREASURE ISLAND, FL 33706

Title: STD () Delete Title: V (X) Change () Addition

 Name:
 COVINGTON, JON
 Name:
 COVINGTON, JON

 Address:
 10071 GULF BLVD
 Address:
 10071 GULF BLVD

City-St-Zip: TREASURE ISLAND, FL 33706 City-St-Zip: TREASURE ISLAND, FL 33706

Title: D () Delete Title: S/T (X) Change () Addition Name: BYRNE, GAIL A Name: WILES, JANE S

Address: 118-107TH AVENUE Address: 10065 GULF BLVD

City-St-Zip: TREASURE ISLAND, FL 33706 City-St-Zip: TREASURE ISLAND, FL 33706

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JANE S. WILES S/T 04/27/2005