2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005688

FILED Apr 08, 2009 Secretary of State

Entity Name: SANDERS BEACH COMMUNITY ASSOCIATION, INC.

	Principal Place of Business:	New Principal Place of Business:
	PRESS ST DLA, FL 32501	1400 CYPRESS ST PENSACOLA, FL 32502
Current Mailing Address:		New Mailing Address:
	PRESS ST DLA, FL 32501	1400 CYPRESS ST PENSACOLA, FL 32502
El Number	r: 26-0053348 FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired (X)
Name and	d Address of Current Registered Agent:	Name and Address of New Registered Agent:
1400 CYP	ROBERT J PRESS ST DLA, FL 32501 US	NEIGER, ROBERT J 1400 CYPRESS ST PENSACOLA, FL 32502 US
	e named entity submits this statement for the te of Florida.	e purpose of changing its registered office or registered agent, or both
SIGNATU	IRE:	04/08/2009
	Electronic Signature of Registered A	Agent Date
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO
Fitle: Name: Address: City-St-Zip:	C () Delete JOCHUM, BLAKE 1440 SONIA ST PENSACOLA, FL 32501	Title: () Change () Addition Name: Address: City-St-Zip:
Fitle: Name: Address: City-St-Zip:	VC () Delete NEIGER, ROBERT 1400 CYPRESS ST PENSACOLA, FL 32501	Title: () Change () Addition Name: Address: City-St-Zip:
Fitle: Name: Address: City-St-Zip:	S () Delete MERRITT, SONIA 805 SOUTH PENSACOLA, FL 32501	Title: () Change () Addition Name: Address: City-St-Zip:
√ame: √ddress:	MERRITT, SONIA 805 SOUTH	Name: Address:
Name: Address: City-St-Zip: Fitle: Name: Address:	MERRITT, SONIA 805 SOUTH PENSACOLA, FL 32501 T () Delete NEIGER, NANCY 1400 CYPRESS ST	Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:

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: NANCY S NEIGER T 04/08/2009