

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000183

FILED  
Jan 08, 2009  
Secretary of State

Entity Name: SILVER SANDS ASSOCIATION, INC.

**Current Principal Place of Business:**

4030 GULF OF MEXICO DRIVE  
LONGBOAT KEY, FL 34228

**New Principal Place of Business:**

5841 GULF OF MEXICO DRIVE  
LONGBOAT KEY, FL 34228

**Current Mailing Address:**

4030 GULF OF MEXICO DRIVE  
LONGBOAT KEY, FL 34228

**New Mailing Address:**

FEI Number: 20-2107720      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

STARR, CHARLES L III  
4030 GULF OF MEXICO DRIVE  
LONGBOAT KEY, FL 34228      US

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

WELLS, KEVN T P.A.  
22 S. LINKS AVENUE  
SUITE 301  
SARASOTA, FL 34236 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: KEVIN T. WELLS

01/08/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: STARR, LARRY  
Address: 4030 GULF OF MEXICO DR  
City-St-Zip: LONGBOAT KEY, FL 34228

Title: P      ( ) Delete  
Name: GOLDTHWRITE, MARY JANE  
Address: 4030 GULF OF MEXICO DR  
City-St-Zip: LONGBOAT KEY, FL 34228

Title: VP      ( ) Delete  
Name: SHANLEY, KATHLEEN  
Address: 4030 GULF OF MEXICO DR  
City-St-Zip: LONGBOAT KEY, FL 342287

Title: ST      (X) Delete  
Name: LOEFGREN, GAIL  
Address: 4030 GULF OF MEXICO DR  
City-St-Zip: LONGBOAT KEY, FL 34228

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P      (X) Change ( ) Addition  
Name: GOLDTHWAITE, MARY JANE  
Address: 4030 GULF OF MEXICO DR  
City-St-Zip: LONGBOAT KEY, FL 34228

Title: VP      (X) Change ( ) Addition  
Name: SHANLEY, KATHLEEN  
Address: 4030 GULF OF MEXICO DR  
City-St-Zip: LONGBOAT KEY, FL 34228

Title: ST      (X) Change ( ) Addition  
Name: LOEFGREN, GAIL  
Address: 4030 GULF OF MEXICO DR  
City-St-Zip: LONGBOAT KEY, FL 342287

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

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: MARY JANE GOLDTHWAITE

P

01/08/2009

Electronic Signature of Signing Officer or Director

Date