2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N05000010244

FILED Sep 23, 2009 Secretary of State

Entity Name: SAN SIMEON PHASE 1 RESIDENTS' ASSOCIATION, INC.

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

G.R.S. MANAGEMENT ASSOCIATES, INC. SUNVAST MANAGEMENT 3900 WOODLAKE BLVD. SUITE 309 381 INTERSTATE BLVD LAKE WORTH, FL 33463 SARASOTA, FL 34240

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

G.R.S. MANAGEMENT ASSOCIATES, INC. SUNVAST MANAGEMENT 3900 WOODLAKE BLVD. SUITE 309 381 INTERSTATE BLVD LAKE WORTH, FL 33463 SARASOTA, FL 34240

FEI Number: 42-1702170 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:

BROUGH, CHADRWO, & LEVINE, P.A. 1900 N. COMMERCE PARKWAY WESTON, FL 33326

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

BULLOCK, WILLIAM ABBOT, CHRIS Name: Name:

150 SECOND AVE. NORTH, SUITE 670 Address: 150 SECOND AVE. NORTH, SUITE 670 Address:

City-St-Zip: ST. PETERSBURG, FL 33701 City-St-Zip: ST. PETERSBURG, FL 33701

Title: DST () Delete Title: () Change () Addition

JOHNSON, BILL Name: Name: Address: 1601 FORUM PLACE, SUITE 805 Address: City-St-Zip: WEST PALM BEACH, FL 33401 City-St-Zip:

Title: VPD () Delete Title: () Change () Addition

HARVEY, JIM Name: Name: 150 SECOND AVE. NORTH, SUITE 670 Address: Address:

City-St-Zip: ST. PETERSBURG, FL 33701 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: CHRIS ABBOT Ρ 09/23/2009