2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011927

Entity Name: SILVER SANDS FORUM, INC.

Apr 29, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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7116 GULF BOULEVARD, SUITE D ST. PETE BEACH, FL 33706

Current Mailing Address: New Mailing Address:

7116 GULF BOULEVARD, SUITE D ST. PETE BEACH, FL 33706

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

BRODERSEN, THOMAS A ESQ 7116 GULF BÓULEVARD, SUITE D ST. PETE BEACH, FL 33706

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

D,P () Change () Addition () Delete BRODERSEN, THOMAS A ESQ. Name: Name:

7116 GULF BOULEVARD, SUITE D Address: Address: City-St-Zip: ST. PETE BEACH, FL 33706 US City-St-Zip:

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

Name: ANDERSON, PATRICIA F ESQ. Name: Address: 7116 GULF BOULEVARD, SUITE D Address: City-St-Zip: ST. PETE BEACH, FL 33706 US City-St-Zip:

Title: () Delete Title: D,T (X) Change () Addition

WOLCOTT, CHERYL Name: CUTTICHIA, PAUL Name: 7116 GULF BLVD SUITE D 6600 SUNSET WAY #519 Address: Address: City-St-Zip: ST PETE BEACH, FL 33706 US City-St-Zip: ST PETE BEACH, FL 33706 US

(X) Change () Addition Title: () Delete Title: D

Name: CUTICCHIA, PAUL Name: KEATOR, CHARLIE 6600 SUNSET WAY #519 6650 SUNSET WAY #215 Address: Address: City-St-Zip: ST. PETE BEACH, FL 33706 US City-St-Zip: ST. PETE BEACH, FL 33706 US

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

KEATOR, CHARLIE SARSFIELD, CHUCK Name: Name: 6650 SUNSET WAY # 215 6600 SUNSET WAY # 514 Address: Address: ST. PETE BEACH, FL 33706 US City-St-Zip: City-St-Zip: ST. PETE BEACH, FL 33706 US

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

SARSFIELD, CHUCK Name: Name: Address: 6600 SUNSET WAY # 514 Address: ST. PETE BEACH, FL 33706 US City-St-Zip: 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: THOMAS A. BRODERSEN Ρ 04/29/2008