

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05424

FILED
May 19, 2009
Secretary of State

Entity Name: SUGAR SANDS CONDOMINIUM ASSOCIATION OF PENSACOLA, INC.

Current Principal Place of Business:

14587 PERDIDO KEY DR
PENSACOLA, FL 32507

New Principal Place of Business:

Current Mailing Address:

7405 KLONDIKE RD
PENSACOLA, FL 32526

New Mailing Address:

FEI Number: 59-2521078 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BABIKOW, WYONA
7405 KLONDIKE RD
PENSACOLA, FL 32526 US

Name and Address of New Registered Agent:

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:

Title: VSD () Delete
Name: SKALICKY, MARION
Address: 14 ROCKWOOD ROAD
City-St-Zip: PENSACOLA, FL 32514

Title: TD () Delete
Name: BABIKOW, WYONA
Address: 7405 KLONDIKE RD
City-St-Zip: PENSACOLA, FL 32526

Title: PD () Delete
Name: IERACITANO, JOE
Address: 1425 PLAYERS CLUB CIRCLE
City-St-Zip: GULF BREEZE, FL 32563

Title: ASD () Delete
Name: BROWNING, MARINA
Address: 102 IRIS CIRCLE
City-St-Zip: DAPHNE, AL 36526

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: ASD (X) Change () Addition
Name: BROWNING, MARINA
Address: 1746 OSPREY COVE
City-St-Zip: NICEVILLE, FL 32578

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: WYONA BABIKOW

TD

05/19/2009

Electronic Signature of Signing Officer or Director

Date