2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001420

FILED Apr 15, 2010 Secretary of State

Entity Name: INLET SUNRISE CONDOMINIUM ASSOCIATION, INC.

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

C/O MAY MANAGEMENT C/O JACOBS, JACOBS AND ASSOCIATES

5455 A1A S 461 A1A BEACH BLVD

SAINT AUGUSTINE, FL 32080 SAINT AUGUSTINE, FL 32080

Current Mailing Address: New Mailing Address:

5455 A1A SOUTH 461 A1A BEACH BLVD

SAINT AUGUSTINE, FL 32080 SAINT AUGUSTINE, FL 32080

FEI Number: 41-2205940 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:

MAY MANAGEMENT SERVICE INC
5455 A1A SOUTH

JACOBS, JACOBS AND ASSOCIATES
461 A1A BEACH BLVD

SAINT AUGUSTINE, FL 32080 US SAINT AUGUSTINE, FL 32080 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: PHILIP JACOBS 04/15/2010

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: F

Name: ALEXANDER, MARK
Address: 19 OLD MISSION AVENUE
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: S/T

Name: MAISCH, JAN

Address: 19 OLD MISSION AVENUE City-St-Zip: ST AUGUSTINE, FL 32084

Title: VP

 Name:
 RIPPE, HERBERT

 Address:
 1 RADIO ROAD #202

 City-St-Zip:
 ST AUGUSTINE, FL 32084

I hereby 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 all other like empowered.

SIGNATURE: PHILIP JACOBS P 04/15/2010