

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08301

FILED
Apr 12, 2009
Secretary of State

Entity Name: DUNEDIN BEACH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2616 ST. JOSEPH DR. W.
DUNEDIN, FL 34698 US

New Principal Place of Business:

Current Mailing Address:

1200 VIRGINIA AVE
PALM HARBOR, FL 34683 US

New Mailing Address:

FEI Number: 59-2896300

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, MARY ANN
1200 VIRGINIA AVE
PALM HARBOR, FL 34683 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: PD () Delete
Name: SCHIRMER, JOHN D
Address: 140 TURTLE CREEK CIRCLE
City-St-Zip: OLDSMAR, FL 34677

Title: VD () Delete
Name: PELC, DOLORES C
Address: 11647 WHEATFIELD LOOP
City-St-Zip: HUDSON, FL 34667

Title: TD () Delete
Name: SMITH, MARY ANN
Address: 1200 VIRGINIA AVE
City-St-Zip: PALM HARBOR, FL 34683

Title: SD (X) Delete
Name: SMITH, JERRY W
Address: 1200 VIRGINIA AVE
City-St-Zip: PALM HARBOR, FL 34683

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TSD (X) Change () Addition
Name: SMITH, MARY ANN
Address: 1200 VIRGINIA AVE
City-St-Zip: PALM HARBOR, FL 34683

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 ANN SMITH

STD

04/12/2009

Electronic Signature of Signing Officer or Director

Date