2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15619

FILED Apr 29, 2009 Secretary of State

Entity Name: SANCTUARY BY THE SEA HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 2255 MOCKINGBIRD LANE INDIALANTIC, FL 32903 **Current Mailing Address: New Mailing Address:** 2255 MOCKINGBIRD LANE INDIALANTIC, FL 32903 FEI Number: 59-2689729 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: BECKER & POLIAKOFF, P.A. 2500 MAITLAND CENTER PKWY STE 209 MAITLAND, FL 32751 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: () Delete (X) Change () Addition BIGGIN, JIM BARNETTE, PAT Name: Name: 323 PEREGRINE DR Address: 668 PEREGRINE DR Address: City-St-Zip: INDIALANTIC, FL 32903 City-St-Zip: INDIALANTIC, FL 32903 Title: () Delete Title: (X) Change () Addition DIVINE, DWIGHT Name: BIGGIN, JIM Name: Address: 801 PEREGRINE DR Address: 323 PEREGRINE DR City-St-Zip: INDIALANTIC, FL 32903 City-St-Zip: INDIALANTIC, FL 32903 Title: () Delete Title: (X) Change () Addition GUNDLACH, WILLIAM VAN ZANTE, PATTI Name: Name: 811 PEREGRINE DR 802 SANDERLING DR Address: Address: City-St-Zip: INDIALANTIC, FL 32903 City-St-Zip: INDIALANTIC, FL 32903 Title: ASST () Delete Title: (X) Change () Addition Name: BARNETTE, PAT Name: WHITE, CINDY Address: 668 PEREGRINE DR Address: 403 PEREGRINE DR City-St-Zip: INDIALANTIC, FL 32903 City-St-Zip: INDIALANTIC, FL 32903 Title: () Delete Title: () Change () Addition KRAUSE, LEE Name: Name: 695 SANDERLING DR Address: Address: City-St-Zip: INDIALANTIC, FL 32903 City-St-Zip: Title: () Delete Title: () Change (X) Addition GUNDLACH, WILLIAM Name: Name: Address: Address: 811 PEREGRINE DR INDIALANTIC, FL 32903 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: JIM BIGGIN P 04/29/2009