

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006 8:00 am
Secretary of State

04-17-2006 90375 049 ****61.25

DOCUMENT # N23969 1. Entity Name SNUG HARBOR LAKES CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 7645 KYAK COURT MICCO, FL 32976			Mailing Address 7645 KYAK COURT MICCO, FL 32976 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-2977605	
5. Certificate of Status Desired ☐				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
BECKER & POLIAKOFF, P.A. C/O C. JOHN CHRISTENSEN, ESQ. 2500 MAITLAND CENTER PARKWAY, #209 MAITLAND, FL 32751				Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	P ☐ Delete		TITLE	☐ Change ☐ Addition	
NAME	ALDRICH, JENARITA		NAME		
STREET ADDRESS	5455 BANNOCK STREET		STREET ADDRESS		
CITY-ST-ZIP	MICCO, FL 32976		CITY-ST-ZIP		
TITLE	VPCS ☐ Delete		TITLE	☐ Change ☐ Addition	
NAME	BELLER, DOLLIE		NAME		
STREET ADDRESS	5387 BANNOCK ST		STREET ADDRESS		
CITY-ST-ZIP	MICCO, FL 32976		CITY-ST-ZIP		
TITLE	Y ☒ Delete		TITLE	☐ Change ☐ Addition	
NAME	JENNINGS, EMMA LOU		NAME		
STREET ADDRESS	1048 DRACENA DR		STREET ADDRESS		
CITY-ST-ZIP	MICCO, FL 32976		CITY-ST-ZIP		
TITLE	D ☐ Delete		TITLE	TREASURER ☒ Change ☐ Addition	
NAME	KELLER, CAROL		NAME		
STREET ADDRESS	5427 BANNOCK ST		STREET ADDRESS		
CITY-ST-ZIP	MICCO, FL 32976		CITY-ST-ZIP		
TITLE	D ☐ Delete		TITLE	☐ Change ☐ Addition	
NAME	DEMAR, TONY		NAME		
STREET ADDRESS	1068 DRACENA DR.		STREET ADDRESS		
CITY-ST-ZIP	MICCO, FL 32976		CITY-ST-ZIP		
TITLE	☐ Delete		TITLE	☐ Change ☒ Addition	
NAME			NAME	D BERTRAM ANDERSON	
STREET ADDRESS			STREET ADDRESS	7646 GREAT BEAR LAKE DR.	
CITY-ST-ZIP			CITY-ST-ZIP	MICCO, FL 32976	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Jenarita F. Aldrich</i> Jenarita F. Aldrich 4/10/06 772-663-5832 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

40051126