


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2008 8:00 am
Secretary of State

04-09-2008 90030 034 ****61.25

DOCUMENT # N27384	
1. Entity Name BELLEAIR SANDS CONDOMINIUM ASSOCIATION, INC.	

Principal Place of Business 3210 GULF BLVD. 207 BELLEAIR BEACH, FL 33786	Mailing Address CMC INC 4175 EAST BAY STE 205 CLEARWATER, FL 33764
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40062341



2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

03272008 Chg-NP CR2E037 (12/06)

4. FEI Number 59-1685838	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent	
HILBRANDT, HAL CMC INC 4175 EAST BAY DR STE., 205 CLEARWATER, FL 33764	

7. Name and Address of New Registered Agent	
Name Commons, Richard P.A.	
Street Address (P.O. Box Number is Not Acceptable) 300 South Duncan Ave	
Suite # 220B	
City Clearwater	FL Zip Code 33755

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 *Richard Commons* DATE 4/4/08
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, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS PEÑONSKY, MARYANN 3210 GULF BLVD # 206 BELLEAIR BEACH, FL 337863603 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FEATHERSTONE, RON 3210 GULF BLVD #308 BELLEAIR BEACH, FL 33786 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FEATHERSTONE, JULIE 3210 GULF BLVD #308 BELLEAIR BEACH, FL 33786 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PARKER, JANE A 3210 GULF BLVD #202 BELLEAIR BEACH, FL 33786 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KROWSKA, ELEANOR 3210 GULF BLVD #301 BELLEAIR BEACH, FL 33786 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TOENNIESSEN, JOAN 3210 GULF BLVD #302 BELLEAIR BEACH, FL 33786 <input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Featherstone, Ron 10226 Falcon Terrace Seminole, FL 33778 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Parker, Jane 600 Woodland Drive Paducah, KY 42001 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS Conry, Carol 3210 Gulf Blvd. #101 Belleair Beach, FL 33786 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Ronald W. Featherstone* **RONALD W. FEATHERSTONE** 4-6-08 727.392-3141
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

PRESIDENT