2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41570

Address:

FILED Feb 04, 2008 Secretary of State

Entity Name: SUNNY SANDS RESIDENTS ASSOCIATION, INC.

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

524 CENTRAL BLVD 104 RIDGE RD

PIERSON, FL 32180 US US PIERSON, FL 32180

Current Mailing Address: New Mailing Address:

524 CENTRAL BLVD 104 RIDGE RD

PIERSON, FL 32180 US PIERSON, FL 32180 US

FEI Number: 59-3054889 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

COLLINS, LEE JAY SENIOR, CHARLIE W 529 VERSAILLES SR 104 RIDGE RD US

STE 103 PIERSON, FL 32180 MAITLAND, FL 32751 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: CHARLES W. SENIOR 02/04/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

TAYLOR, CHARLES MARINO, MIKE Name: Name: 524 CENTRAL BLVD Address: 207 MELODIE LN Address: City-St-Zip: PIERSON, FL 32180 City-St-Zip: PIERSON, FL 32180

Title: () Delete Title: DV (X) Change () Addition SENIOR, CHARLES Name: KOPSA, KATI Name:

Address: 104 ROYAL RD Address: 406 PALM AVE City-St-Zip: PIERSON, FL 32180 City-St-Zip: PIERSON, FL 32180

Title: DS () Delete Title: (X) Change () Addition FRISTAD, JOHN T SENIOR, CHARLES W Name: Name:

Address: 415 PAL AVE Address: 104 RIDGE RD City-St-Zip: PIERSON, FL 32180 City-St-Zip: PIERSON, FL 32180

Title: DT () Delete Title: DT (X) Change () Addition

Name: ALLEN, DAVID Name: TAYLOR, CHARLES 524 CENTRAL BLVD Address: 127 RIDGE RD Address: City-St-Zip: PIERSON, FL 32180 City-St-Zip: PIERSON, FL 32180

Title: () Delete Title: (X) Change () Addition Name:

DILLON, MIKE BROWNE, BOB Name: 407 PALM AVE 419 PALM AVE. Address: City-St-Zip: PIERSON, FL 32180 City-St-Zip: PIERSON, FL 32180

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: CHARLES W, SENIOR DS 02/04/2008