

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 01, 2007 8:00 am
Secretary of State

03-01-2007 90008 011 ****61.25

DOCUMENT # N43503 1. Entity Name SEA DUNES DRIVE - SUNSET POINT LANE PROPERTY OWNERS ASSOCIATION, INC.					
Principal Place of Business 145 SEA DUNES DR. MELBOURNE BEACH FL 32951 US		Mailing Address 145 SEA DUNES DR. MELBOURNE BEACH FL 32951 US			
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-3142778	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent WILSON, CEIL 175 SEA DUNES DR MELBOURNE BEACH FL 32951			7. Name and Address of New Registered Agent 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)					
FILE NOW: FEE IS \$61.25 Due By May 1, 2007		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 NAME STREET ADDRESS CITY - ST - ZIP	P MCDUGALL, LEE 145 SEA DUNES DR. MELBOURNE BEACH FL 32951	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	P. Muise, David 205 SEA DUNES DR MELBOURNE Bch, FL 32951	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V ORLANDO, JOE 165 SEA DUNES DR. MELBOURNE BEACH FL 32951	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	V. Leighton, Ewan 270 Sea Dunes DR Melb. Bch, FL 32951	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S PECOR, MAUREEN 170 SEA DUNES DR. MELBOURNE BEACH FL 32951	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	S. Mc Dougall, Carolyn 145 Sea Dunes DR Melb. Bch, FL 32951	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GRIFFITH, RICHARD 265 SEA DUNES DR. MELBOURNE BEACH FL 32951	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	T Orlando, Breuss 145 Sea Dunes DR Melb. Bch, FL 32951	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HOWELL, KIRBY 135 SEA DUNES DR. MELBOURNE BEACH FL 32951	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Griffith, Richard 265 SEA Dunes DR Melbourne Bch, FL	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T WILSON, CEIL 175 SEA DUNES DR MELBOURNE BEACH FL 32951	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Wilson, Ceil 175 Sea Dunes DR Melb. Bch, FL 32951	☒ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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>Carolyn S. McDougall</i>			2-5-07		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Daytime Phone #		