2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N43503

FILED Apr 30, 2003 Secretary of State

Entity Name: SEA DUNES DRIVE - SUNSET POINT LANE PROPERTY OWNERS ASSOCIATION, INC.

MELBOURNE BEACH, FL 32951 US FEI Number: 59-3142778 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: MCDOUGALL, CARROLYN NW 145 SEA DUNES DR. MELBOURNE BEACH, FL 32951 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: Electronic Signature of Registered Agent Date OFFICERS AND DIRECTORS: Title: P () Delete Name: MCDOUGALL, LEE Address: 145 SEA DUNES DR. City-St-Zip: MELBOURNE BEACH, FL 32951 Title: V () Delete Name: ORLANDO, JOE Address: 165 SEA DUNES DR. Address: 165 SEA DUNES DR. City-St-Zip: MELBOURNE BEACH, FL 32951 Title: S () Delete Name: GRORF, REBECCA Address: 205 SEA DUNES DR. City-St-Zip: MELBOURNE BEACH, FL 32951 US Title: D () Delete Name: GRORF, REBECCA Address: 205 SEA DUNES DR. City-St-Zip: MELBOURNE BEACH, FL 32951 US Title: D () Delete Name: GRORF, REBECCA Address: 205 SEA DUNES DR. City-St-Zip: MELBOURNE BEACH, FL 32951 US Title: D () Delete Name: GRORF, REBECCA Address: 205 SEA DUNES DR. City-St-Zip: MELBOURNE BEACH, FL 32951 US Title: D () Delete Name: Address: 205 SEA DUNES DR. City-St-Zip: MELBOURNE BEACH, FL 32951 US Title: Name: WILLOWN, CEIL Name: WILLOWN, CEI	Current P	rincipal Place of I	Busines	ss:	New Prince	cipal Place of Business:
### Address Ad			2951	US		
FEI Number: 59-3142778 FEI Number Applied For() FEI Number Not Applicable() Certificate of Status Desired() Name and Address of Current Registered Agent: MCDOUGALL, CARROLYN NW 145 SEA DUNIES DR. MCLBOURNE BEACH, FL 32951 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: Electronic Signature of Registered Agent	Current M	ailing Address:			New Maili	ing Address:
Name and Address of Current Registered Agent: MCDOUGALL, CARROLYN NW 145 SEA DUNES DR, MELBOURNE BEACH, FL 32951 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: Electronic Signature of Registered Agent			2951	US		
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in the State of Florida. SIGNATURE:	145 SEA D	UNES DR.		US		
Electronic Signature of Registered Agent OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS Title: P () Delete Name: MCDOUGALL, LEE Name: MCBOURS BR. Address: City-St-Zip: MELBOURNE BEACH, FL 32951 Title: V () Delete Name: ORLANDO, JOE Name: Address: City-St-Zip: MELBOURNE BEACH, FL 32951 Title: S () Delete Name: GRAFF, REBECCA Name: GRAFF, REBECCA Address: 205 SEA DUNES DR. City-St-Zip: MELBOURNE BEACH, FL 32951 US Title: D () Delete Name: GRAFF, REBECCA Address: 205 SEA DUNES DR. City-St-Zip: MELBOURNE BEACH, FL 32951 US Title: D () Delete Name: GRIFFITH, RICHARD Name: GRIFFITH, RICHARD Name: Address: 265 SEA DUNES DR. City-St-Zip: MELBOURNE BEACH, FL 32951 US Title: T () Delete Name: Address: City-St-Zip: MELBOURNE BEACH, FL 32951 Title: T () Delete Name: Address: City-St-Zip: MELBOURNE BEACH, FL 32951 Title: T () Delete Name: Address: City-St-Zip: MELBOURNE BEACH, FL 32951 Title: T () Delete Name: Address: City-St-Zip: MELBOURNE BEACH, FL 32951 Title: T () Delete Name: Address: City-St-Zip: MELBOURNE BEACH, FL 32951 Title: D () Change () Addition Name: Address: Title: () Change () Addition Name: Address: Title: () Change () Addition Name: Address: Title: () Change () Addition Name: Address: Title: () Change () Addition Name: Address: Title: () Change () Addition Name: Address: Title: () Change () Addition Name: Address: Title: () Change () Addition Name: Address: Title: () Change () Addition Name: Address: Title: () Change () Addition Name: Address: Title: () Change () Addition Name: Address: Title: () Change () Addition Name: Address: Title: () Change () Addition Name: Address: Title: () Change () Addition Name: Address: Title: () Change () Addition Name: Address: Title: () Change () Addition Name: Address: Title: () Change () Addition Name: Address: Title: () Change () Addition Name: Address: Title: () Change () Addition Name: Address: Title: ()			nits this	statement for the pu	rpose of changing i	its registered office or registered agent, or both,
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Name: ORLANDO, JOE Address: 165 SEA DUNES DR. Address: City-St-Zip: MELBOURNE BEACH, FL 32951 City-St-Zip: Title: S () Delete Title: S (X) Change () Addition Name: GRORF, REBECCA Name: GRAEF, REBECCA Address: 205 SEA DUNES DR. Address: 205 SEA DUNES DR. City-St-Zip: MELBOURNE BEACH, FL 32951 US City-St-Zip: MELBOURNE BEACH, FL 32951 US Title: D () Delete Title: () Change () Addition Name: GRIFFITH, RICHARD Name: Address: 265 SEA DUNES DR. City-St-Zip: MELBOURNE BEACH, FL 32951 Title: T () Delete Title: () Change () Addition Name: Address: City-St-Zip: MELBOURNE BEACH, FL 32951 Title: T () Delete Title: () Change () Addition Name: WILSON, CEIL Name: Address: City-St-Zip: MELBOURNE BEACH, FL 32951 Title: D () Delete Title: () Change () Addition Name: MILSON, CEIL Name: Address: City-St-Zip: MELBOURNE BEACH, FL 32951 Title: D () Delete Title: () Change () Addition Name: WILLIAMSON, TERRY Name: Mame: WILLIAMSON, TERRY Name: Address: 115 SEA DUNES DR. Address: Address: Address: Address: Name: Address: 115 SEA DUNES DR. Address: Ad	Name: Address:	MCDOUGALL, LEE 145 SEA DUNES DR	t .	951	Name: Address:	() Change () Addition
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Name: WILSON, CEIL Name: Address: 175 SEA DUNES DR Address: City-St-Zip: MELBOURNE BEACH, FL 32951 City-St-Zip: Title: D () Delete Title: () Change () Addition Name: WILLIAMSON, TERRY Name: Address: 115 SEA DUNES DR. Address:	Name: Address:	GRIFFITH, RICHARD 265 SEA DUNES DR) t.	951	Name: Address:	() Change () Addition
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	Name: Address:	WILLIAMSON, TERF 115 SEA DUNES DR	RY L	951	Name: Address:	() Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: REBECCA GRAEF S 04/30/2003