

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 23, 2004 8:00 am**  
**Secretary of State**

02-23-2004 90059 022 \*\*\*\*61.25

**DOCUMENT # N48465**



1. Entity Name  
**SUN RAY VILLAGE OWNERS ASSOCIATION, INC.**

Principal Place of Business  
**20 VIA DELUNA DR.  
PENSACOLA BEACH, FL 32561**

Mailing Address  
**20 VIA DELUNA DR.  
PENSACOLA BEACH, FL 32561**

**34010373**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01272004 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number  
**59-3181724**

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**TOEPFER, ALLAN  
3501 SILVERTREE LN  
PENSACOLA, FL 32504**

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)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2004**

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

TITLE **P** ☐ Delete  
NAME **TOEPFER, ALLAN**  
STREET ADDRESS **3501 SILVERTREE LANE**  
CITY-ST-ZIP **PENSACOLA, FL 32504**

TITLE **S** ☐ Delete  
NAME **DANCAESCU, LUCIAN**  
STREET ADDRESS **112 MATAMOROE DR.**  
CITY-ST-ZIP **GULF BREEZE, FL 32561**

TITLE **D** ☐ Delete  
NAME **GRAM, PETER**  
STREET ADDRESS **2031 GALT ROAD**  
CITY-ST-ZIP **PENSACOLA, FL 32503**

TITLE **VP** ☐ Delete  
NAME **GODWIN, PAULINE**  
STREET ADDRESS **503 PORT ROYAL**  
CITY-ST-ZIP **PENSACOLA, FL 32501**

TITLE **D** ☐ Delete  
NAME **OSCAR, TINA**  
STREET ADDRESS **865 INDUSTRIAL CT**  
CITY-ST-ZIP **PENSACOLA, FL 32505**

TITLE **D** ☒ Delete  
NAME **ELEBASH, WILLIAM**  
STREET ADDRESS **PO BOX 1872**  
CITY-ST-ZIP **PENSACOLA, FL 32589**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition  
NAME **T Brown, Charlie**  
STREET ADDRESS **170 Stoneway Trail**  
CITY-ST-ZIP **Madison AL 35758**

12. I hereby certify that the information supplied with this filing does not qualify 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 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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**2-16-04**

Date

**(850) 932-4300**

Daytime Phone #

Additional page for:

*Attachment  
#N48465*

Document N48465 SUN RAY VILLAGE OWNERS ASSOCIATION, INC.

D  
LEQUERICA, FRANK  
6820 East Bay Blvd.  
Navarre FL 32566

Addition

D  
PINZINO, JOHN R.  
999 Ft. Pickens Rd. #705  
Pensacola Beach FL 32561

Addition

D  
HAUG, CARTER  
5636 Berry Brook Circle  
Pace FL 32571

Addition