

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48465

FILED
Mar 01, 2011
Secretary of State

Entity Name: SUN RAY VILLAGE OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

20 VIA DELUNA DR.
PENSACOLA BEACH, FL 32561

New Principal Place of Business:

20 VIA DE LUNA DR.
PENSACOLA BEACH, FL 32561

Current Mailing Address:

PO BOX 13270
PENSACOLA, FL 325913270

New Mailing Address:

FEI Number: 59-3181724 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ASMAR, JOEL
254 LE STARBOARD DRIVE
PENSACOLA, FL 32561 US

Name and Address of New Registered Agent:

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: T
Name: DOUGLAS, MIKE
Address: 512 YORK ST
City-St-Zip: GULF BREEZE, FL 32561

Title: D
Name: GRIMES, PAUL
Address: 3 W GARDEN ST, STE 346
City-St-Zip: PENSACOLA, FL 32502

Title: D
Name: JOHN, PINZINO
Address: 45 VIA DE LUNA DR #B
City-St-Zip: PENSACOLA BEACH, FL 32561

Title: V
Name: OSCAR, TINA
Address: 5558 EAST BAY BLVD
City-St-Zip: GULF BREEZE, FL 32563

Title: P
Name: BROWN, CHARLIE
Address: 170 STONEWAY TRAIL
City-St-Zip: MADISON, AL 35758

Title: S
Name: ASMAR, JOEL
Address: 254 LE STARBOARD DR
City-St-Zip: PENSACOLA BEACH, FL 32561

I hereby 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 all other like empowered.

SIGNATURE: MIKE DOUGLAS

T

03/01/2011

Electronic Signature of Signing Officer or Director

Date