2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2009
Secretary of State

DOCUMENT# N93000001474

Entity Name: THE SOUTH AMELIA ISLAND SHORE STABILIZATION ASSOCIATION, INC.

Current Principal Place of Business:

% AMELIA ISLAND MANAGEMENT
3000 FIRST COAST HWY
AMELIA ISLAND, FL 32034 US

New Principal Place of Business:

Current Mailing Address:

% AMELIA ISLAND MANAGEMENT
3000 FIRST COAST HWY
AMELIA ISLAND, FL 32034 US

New Mailing Address:

FEI Number: 59-3173190 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HEALAN, JACK B JR
3000 FIRST COAST HWY
AMELIA ISLAND, FL 32034 US

Name and Address of New Registered Agent:

MUIR, ROBERT C III
AMELIA ISLAND MANAGEMENT
3000 FIRST COAST HIGHWAY
AMELIA ISLAND, FL 32034 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: ROBERT C. MUIR, III 01/25/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: VPD ( ) Delete
Name: HEALAN, JACK B
Address: 6 HARRISON CREEK RD
City-St-Zip: AMELIA ISLAND, FL

Title: D ( ) Delete
Name: MARTIN, ROBERT
Address: 8030 FIRST COAST HIGHWAY 1C
City-St-Zip: AMELIA ISLAND, FL 32034

Title: SD ( ) Delete
Name: BIERMAN, DANIEL
Address: 21 PAINTED BUNTING
City-St-Zip: AMELIA ISLAND, FL 32034

Title: PD ( ) Delete
Name: MCCABE, ED
Address: 705 OCEAN CLUB PLACE
City-St-Zip: AMELIA ISLAND, FL

Title: TD ( ) Delete
Name: BRANNEN, MARY
Address: 6512 BEACHWOOD RD
City-St-Zip: AMELIA ISLAND, FL 32034

Title: D ( ) Delete
Name: GALLAGHER, CHERRY
Address: 6502 SPYGLASS CIRCLE
City-St-Zip: AMELIA ISLAND, FL 32034

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change ( ) Addition
Name: HEALAN, JACK B
Address: 6 HARRISON CREEK RD
City-St-Zip: AMELIA ISLAND, FL

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change ( ) Addition
Name: BRANNEN, MARY
Address: 6512 SPYGLASS CIRCLE
City-St-Zip: AMELIA ISLAND, FL 32034

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: EDWARD MCCABE P 01/25/2009
Electronic Signature of Signing Officer or Director Date