

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000837

FILED
Apr 21, 2004
Secretary of State**Entity Name:** SOUTHERN DUNES MASTER COMMUNITY ASSOCIATION, INC.**Current Principal Place of Business:**2180 WEST SR 434
5000
LONGWOOD, FL 32779 US**New Principal Place of Business:**2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 32779 US**Current Mailing Address:**2180 WEST SR 434
5000
LONGWOOD, FL 32779 US**New Mailing Address:**2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 32779 US**FEI Number:** 59-3230399**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HART, JAMES W JR.
SENTRY MANAGEMENT INC.
2180 WEST SR 434, STE 5000
LONGWOOD, FL 32779 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:** STD () Delete
Name: FROELICH, SEAN
Address: 5401 S. KIRKMAN ROAD, STE 525
City-St-Zip: ORLANDO, FL 32819**Title:** VD () Delete
Name: DONLEY, TERRY
Address: 2235 CRUMP ROAD
City-St-Zip: WINTER HAVEN, FL 33884**Title:** PD () Delete
Name: FORREST, RALPH
Address: 2888 SOUTHERN DUNES BLVD
City-St-Zip: HAINES CITY, FL 33884**Title:** () Delete
Name:
Address:
City-St-Zip:**Title:** () Delete
Name:
Address:
City-St-Zip:**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PD (X) Change () Addition
Name: GROBASKY, WILLIAM
Address: 1906 SOUTHERN DUNES BLVD
City-St-Zip: HAINES CITY, FL 33844**Title:** VPD (X) Change () Addition
Name: BARROWMAN, JOHN
Address: 2113 MALLORY CIR
City-St-Zip: HAINES CITY, FL 33884**Title:** SD (X) Change () Addition
Name: DURBIN, JOHN F
Address: 5 STEAM GUN PL
City-St-Zip: HILTON HEAD ISLAND, SC 29928**Title:** TD () Change (X) Addition
Name: HOWE, DAVID W
Address: 2227 MALLORY CIR
City-St-Zip: HAINES CITY, FL 33884**Title:** D () Change (X) Addition
Name: QUINLAN, MICHAEL
Address: 2385 PAULETTE DR
City-St-Zip: HAINES CITY, FL 33844**Title:** D () Change (X) Addition
Name: FORREST, RALPH
Address: 2888 SOUTHERN DUNES BLVD
City-St-Zip: HAINES CITY, FL 33844

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: WILLIAM GROBASKY

PD

04/21/2004

Electronic Signature of Signing Officer or Director

Date