

FILE NOW: FILING FEE IS \$61.25

FILED  
Apr 30 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 731418 (0)**  
1. Corporation Name  
**THE SANDARAC ASSOCIATION, INC.**



Principal Place of Business <b>6666 ESTERO BLVD FT MYERS BEACH FL 33931</b>	Mailing Address <b>6666 ESTERO BLVD FT MYERS BEACH FL 33931</b>
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3. Date Incorporated or Qualified <b>12/18/1974</b>		
4. FEI Number <b>59-1807853</b>	Applied For <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>	
7. Is this nonprofit corporation a homeowners association? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24	29
25	30

9. Name and Address of Current Registered Agent

**PLATTEN, WILLIAM E.  
6670 ESTERO BLVD  
APT. A-202  
FT MYERS BEACH FL 33931**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD PLATTEN, WILLIAM E	1.1 TITLE	D LORENTSON, JAMES
NAME	6670 ESTERO BLVD	1.2 NAME	6672 ESTERO BLVD
STREET ADDRESS	FT.MYERS BCH. FL	1.3 STREET ADDRESS	FT. MYERS BCH. FL 33931
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	SD MAIORCA, GRACE	2.1 TITLE	D STEWART, RICHARD
NAME	6670 ESTERO BLVD.	2.2 NAME	6672 ESTERO BLVD
STREET ADDRESS	FT.MYERS BCH. FL 33931	2.3 STREET ADDRESS	FT. MYERS BCH FL 33931
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	D LEBEN, ROBERT	3.1 TITLE	
NAME	6670 ESTERO BOULEVARD	3.2 NAME	
STREET ADDRESS	FT.MYERS BCH. FL 33931	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	VD SCHILLING, FRANCIS	4.1 TITLE	
NAME	6672 ESTERO BLVD	4.2 NAME	
STREET ADDRESS	FT.MYERS BCH. 33 931	4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	TD ARCHER, G. EUGENE	5.1 TITLE	
NAME	6670 ESTERO BLVD	5.2 NAME	
STREET ADDRESS	FT MYERS BEACH FL	5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	D CARNDUFF, JOHN	6.1 TITLE	SD
NAME	6670 ESTERO BLVD	6.2 NAME	
STREET ADDRESS	FT MYERS BEACH FL	6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	D LORENTSON, JAMES
1.2 NAME	6672 ESTERO BLVD
1.3 STREET ADDRESS	FT. MYERS BCH. FL 33931
1.4 CITY-ST-ZIP	
2.1 TITLE	D STEWART, RICHARD
2.2 NAME	6672 ESTERO BLVD
2.3 STREET ADDRESS	FT. MYERS BCH FL 33931
2.4 CITY-ST-ZIP	
3.1 TITLE	
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	SD
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *William E. Platten Pres* April 17, 1998 941 463-6080

CFR2E037 (10/97)