

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **747273**

1. Entity Name

SANDPIPER VILLAGE CONDOMINIUM ASSOCIATION, INC.

FILED
Apr 18, 2000 8:00 am
Secretary of State

04-18-2000 90259 027 ****61.25



DO NOT WRITE IN THIS SPACE

Principal Place of Business 1096 OLD HIGHWAY 98 SUITE C-102B DESTIN FL 32541 US	Mailing Address 1096 OLD HIGHWAY 98 SUITE C-102B DESTIN FL 32541-7015 US
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2. Principal Place of Business	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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4. FEI Number 59-1750945	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~MCLEOD, ROY~~
**1096 OLD HIGHWAY 98
 SUITE C-102B
 DESTIN FL 32541**

Name **DAVID W. BELL**
 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.

David W. Bell
 Signature

DAVID W. BELL, AGENT

04-14-00

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD PRATT, BRYAN 73 SANDPIPER DRIVE DESTIN FL 32541	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD HERMAN, RICHARD 146 ST. ANDREWS DRIVE FRANKLIN TN	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOLT, FRED 4255 POPULAR AVE MEMPHIS TN 38117	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP LUTZ, ARNO 747 SANDPIPER VILLAGE- SANDESTIN DESTIN FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRUBBS, BILL 783 FAIRWAY CT #20258 JASPER GA 36143	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HILTON, ROBERT 3637 SHANDWICK PLACE BIRMINGHAM AL	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
773 Sandpiper Dr DESTIN, FL 32541	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
37069-7063	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
703 SANDPIPER DR. DESTIN, FL 32541	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
32541	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
30143	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
35242-6418	

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: *Arno J. Lutz*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-07-00

Date

850-837-4898

Daytime Phone #

CR2E037 19/99