2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2007 8:00 am
Secretary of State
04-09-2007 90046 021 ****61.25

DOCUMENT # 750810

1. Entity Name
SANDPOINTE BAY CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
19800 SANDPOINTE BAY DR. BOX A TEQUESTA, FL 33469	19800 US HWY 1 BOX A TEQUESTA, FL 33469 US

01222007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-2237923 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
INGLIS, STEVE 1930 COMMERCE LANE, SUITE 1 JUPITER, FL 33458	Name 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. I am familiar with, and accept the obligations of registered agent.

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

Filing Fee is $61.25
Due by May 1, 2007.

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P REEDY, RICHARD 19800 US HWY 1 TEQUESTA, FL 33469	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P BATT, JIM 19800 US Hwy. 1 #508 Tequesta, FL 33469	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BABINGTON, GAIL 19800 US HWY 1 TEQUESTA, FL 33469	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP LAMOTHE, PAT 19800 US Hwy. 1 #605 Tequesta, FL 33469	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP BLACKBURN, JIM 19800 US HWY 1 TEQUESTA, FL 33469	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S GRIMSTE, DONNA 19800 US Hwy. 1 #108 Tequesta, FL 33469	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD HUNSINGER, FAYE 19800 U. S. HWY 1 #411 TEQUESTA, FL 33469	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T INGLESINO, BERT 19800 US Hwy.,1 #802 Tequesta, FL 33469	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T BRINKLEY, FRED 19800 US HWY 1 TEQUESTA, FL 33469	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AT LARGE HUNSINGER, FAYE 19800 US Hwy. 1 #411 Tequesta, FL 33469	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: _____ TREAS 3-29-07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #