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FILED  
May 09 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 755305 (0)

1. Corporation Name

SANDY COVE CONDOMINIUM ASSOCIATION OF SEMINOLE, INC.



Principal Place of Business

Mailing Address

564 ORANGE DR. #36  
ALTAMONTE SPRINGS FL 32701  
US

2180 WEST SR 434  
5000  
LONGWOOD FL 32779-5044  
US

3. Date Incorporated or Qualified  
11/26/1980

3a. Date of Last Report  
05/01/1996

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

25

29

30

4. FEI Number  
59-2050866

Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HART, JAMES W JR.  
SENTRY MANAGEMENT INC.  
2180 WEST SR 434, SUITE 5000  
LONGWOOD FL 32779

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	<input type="checkbox"/> DELETE
NAME	KING, P. B	
STREET ADDRESS	560 ORANGE DRIVE, #20	
CITY-ST-ZIP	ALTAMONTE SPRINGS FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	RASPOVIC, WILLIAM	
STREET ADDRESS	574 ORANGE DRIVE	
CITY-ST-ZIP	ALTAMONTE SPRINGS FL	
TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	JUSTICE, RICHARD	
STREET ADDRESS	584 ORANGE DRIVE, #109	
CITY-ST-ZIP	ALTAMONTE SPRINGS FL	
TITLE	ASTD	<input type="checkbox"/> DELETE
NAME	QUESADA, DAVID	
STREET ADDRESS	2326 BRECCA COURT	
CITY-ST-ZIP	APOPKA FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	KOHSMAN, WILLIAM	
STREET ADDRESS	622 ORANGE DRIVE #234	
CITY-ST-ZIP	ALTAMONTE SPRINGS FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	KING, BRUCE	
1.3 STREET ADDRESS	902 SPRING VALLEY RD	
1.4 CITY-ST-ZIP	ALTAMONTE SPRINGS FL	
2.1 TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	RASPOVIC, WILLIAM	
2.3 STREET ADDRESS	112 HICKORY TREE RD	
2.4 CITY-ST-ZIP	LONGWOOD FL	
3.1 TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	MATTHEIS, TED	
3.3 STREET ADDRESS	616 ORANGE DR #205	
3.4 CITY-ST-ZIP	ALTAMONTE SPRINGS FL	
4.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	QUESADA, DAVID	
4.3 STREET ADDRESS	2623 BRECCA CT	
4.4 CITY-ST-ZIP	APOPKA FL	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do 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.

*Richard Justice* 4-15-97

CR2E037 (9/96)