2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755305

Apr 30, 2004 Secretary of State

Entity Name: SANDY COVE CONDOMINIUM ASSOCIATION OF SEMINOLE, INC.

Current Principal Place of Business: New Principal Place of Business:

564 ORANGE DR. #36

ALTAMONTE SPRINGS, FL 32701 US

Current Mailing Address: New Mailing Address:

564 ORANGE DR. #36

ALTAMONTE SPRINGS, FL 32701 US

FEI Number: 59-2050866 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ASKEW, JEANNE F ASC PROPERTY SERVICES INC. 3041 NICHOLSON DR PO BOX 196025

WINTER SPRINGS, FL 32719 WINTER PARK, FL 32792 US US

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: EDWARD HAYDEN 04/30/2004

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition LANGLOTZ, RICHARD LANGLOTZ, RICHARD Name: Name:

626 ORANGE DR APT 241 Address: 564 ORANGE DR APT 36 Address: City-St-Zip: ALTAMONTE SPRGS, FL 32701 City-St-Zip: ALTAMONTE SPRGS, FL 32701

Title: SD () Delete Title: SD (X) Change () Addition

FIRMAN, JOSEPH Name: FIRMAN, JOSEPH Name: Address: 624 ORANGE DR #238 Address: 564 ORANGE DR APT 36

City-St-Zip: ALTAMONTE SPRINGS, FL 32701 City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: () Delete Title: (X) Change () Addition WERNER, EDWARD A WERNER, EDWARD A Name: Name:

Address: 568 ORANGE DR APT 46 Address: 564 ORANGE DR APT 36

City-St-Zip: ALTAMONTE SPRINGS, FL 32701 City-St-Zip: ALTAMONTE SPRINGS, FL 32701

() Delete (X) Change () Addition Title: Title: HOSTETTER, SANDRA Name: HOSTETTER, SANDRA Name:

564 ORANGE DR APT 36 Address: 560 ORANGE DR #027 Address: City-St-Zip: ALTAMONTE SPRINGS, FL 32701 City-St-Zip: ALTAMONTE SPRINGS, FL 32701

DV Title:

Title: () Delete (X) Change () Addition HIGGINS, ALAN HIGGINS, ALAN Name: Name:

564 ORANGE DR APT 36 P.O. BOX 1664 Address: Address: City-St-Zip: APOPKA, FL 32704 City-St-Zip: ORLANDO, FL 32701

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: EDWARD WERNER TD 04/30/2004