2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755305

FILED Apr 06, 2009 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 LIS

Current Mailing Address: New Mailing Address:

PO BOX 196025 564 ORANGE DR. #36

ALTAMONTE SPRINGS, FL 32701 WINTER SPRINGS, FL 327196025 US 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:

ASC PROPERTY SERVICES INC. 3625 SR 419 SUITE 280 WINTER SPRINGS, FL 32708 US

OFFICERS AND DIRECTORS:

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:

Electronic Signature of Registered Agent Date

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete () Change () Addition

FULLI, RUTH Name: Name: PO BOX 196025 Address: Address:

City-St-Zip: WINTER SPRINGS, FL 32719 City-St-Zip:

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

NORMAN, DEBRA Name: NORMAN, DEBRA Name: Address: PO BOX 196025 Address: PO BOX 196025

City-St-Zip: WINTER SPRINGS, FL 32719 City-St-Zip: WINTER SPRINGS, FL 32719

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

Address: PO BOX 196025 Address: PO BOX 196025 City-St-Zip: WINTER SPRINGS, FL 32719 City-St-Zip: WINTER SPRINGS, FL 32719

Title: TD () Delete Title: BD (X) Change () Addition

Name: JUSTICE, RICHARD Name: JUSTICE, RICHARD Address: PO BOX 196025 Address: PO BOX 196025

City-St-Zip: WINTER SPRINGS, FL 32719 City-St-Zip: WINTER SPRINGS, FL 32719

Title: () Delete Title: (X) Change () Addition FIRMANI, JOSEPH FIRMANI, JOSEPH Name: Name:

PO BOX 196025 PO BOX 196025 Address: Address: WINTER SPRINGS, FL 327196 WINTER SPRINGS, FL 327196 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: ED HAYDEN MGR 04/06/2009