


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2008 8:00 am
Secretary of State

04-04-2008 90020 046 ****61.25

DOCUMENT # 758737

1. Entity Name
SAND DOLLAR VILLAS ASSOCIATION, INC.



Principal Place of Business
3056 SO FLETCHER AVE
FERNANDINA BCH, FL 32034-2379

Mailing Address
P. O. BOX 16706
FERNANDINA BCH, FL 32035

2. Principal Place of Business - No P.O. Box #
3056 S. FLETCHER AVE

3. Mailing Address
P.O. Box 16706

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State
FERNANDINA BEACH, FL

City & State
FERNANDINA BEACH, FL

Zip
32034-2379

Country
NASSAU

Zip
32035

Country
NASSAU

40058929



04012008 Chg-NP CR2E037 (12/06)

4. FEI Number
59-2357421

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

DARLINGTON REALTY, INC.
474382 SR 200
FERNANDINA BEACH, FL 32034

7. Name and Address of New Registered Agent

Mrs. GERRY GUTHRIE

Street Address (P.O. Box Number is Not Acceptable)
3056 S. FLETCHER AVE

City **FERNANDINA BEACH** FL Zip Code **32034**

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: *Gerry D. Guthrie* DATE: *April 02, 2008*

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

Filing Fee is \$61.25 Due by May 1, 2008

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

TITLE	P	<input type="checkbox"/> Delete
NAME	VANDERLINDE, KRISTEN	
STREET ADDRESS	532 SOUTH SEA LAKE LANE	
CITY-ST-ZIP	PONTE VEDRA BEACH, FL 32082	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	MILLER, RONALD J	
STREET ADDRESS	3864 EMERSON STREET	
CITY-ST-ZIP	MARIETTA, GA 30062	
TITLE	TD	<input type="checkbox"/> Delete
NAME	PITTMAN, CARTER	
STREET ADDRESS	1314 MATTHEWS PLANTATION DRIVE	
CITY-ST-ZIP	MATTHEWS, NC 28105	
TITLE	SD	<input type="checkbox"/> Delete
NAME	LERCH, FRANZ	
STREET ADDRESS	20234 AVENUE SOUTH	
CITY-ST-ZIP	JACKSONVILLE BEACH, FL 32250	
TITLE	D	<input type="checkbox"/> Delete
NAME	WHALEN, MARILYN	
STREET ADDRESS	8206 DEVENS DRIVE	
CITY-ST-ZIP	BRENTWOOD, TN 37027	
TITLE	D	<input type="checkbox"/> Delete
NAME	GARNER, STEVE	
STREET ADDRESS	1774 BRANNEN LAKE ROAD	
CITY-ST-ZIP	STATESBORO, GA 30458	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	VP KATIE FOLTZ	
STREET ADDRESS	3126 MIDVALE RD. N.W	
CITY-ST-ZIP	CANTON, OHIO 44718	
TITLE	VP D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HAROLD ARCHSEY	
STREET ADDRESS	3056 S. FLETCHER AVE	
CITY-ST-ZIP	FERNANDINA BEACH, FL. 32034	
TITLE	D.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	NESBITT MIMBS	
STREET ADDRESS	3056 S. FLETCHER AVE.	
CITY-ST-ZIP	FERNANDINA BEACH, FL 32034	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: *Gerry D. Guthrie* DATE: *04-02-08* 904-310-6715

Signature and typed or printed name of signing officer or director

GERRY D. GUTHRIE