

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 15 PM 3:12

DOCUMENT # 761216 (1)
1. Corporation Name
SANDPIPER TOWERS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business Mailing Address
205 A-1-A S. PATRICK SHORES SATELLITE BEACH FL 32937
205 A-1-A S. PATRICK SHORES SATELLITE BEACH FL 32937

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 12/23/1981	3a. Date of Last Report 02/28/1994
4. FEI Number 59-2234340	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input type="checkbox"/>	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23	28
Zip Country	Zip Country
24	29
25	30

9. Name and Address of Current Registered Agent HEDERMAN, CATHIE 205 A-1-A #205 SATELLITE BCH. FL 32937	10. Name and Address of New Registered Agent 81 Name Herbert Smith Jr. 82 Street Address (P.O. Box Number is Not Acceptable) 205 A1A, #309 83 Satellite Beach, Fl. 32937 84 City FL 85 Zip Code
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0705, Florida Statutes.

SIGNATURE: *Robert Strobert* DATE: 2/8/95
(NOTE: Registered Agent signature required when resigning)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D	RADUC, ROBERT 205 A-1-A #408 SATELLITE BCH. FL	1.1 TITLE Vice-President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE TD	PIESCHEL, EUGENE 205 A-1-A #209 SATELLITE BCH FL	1.2 NAME Samuel Strobert	
TITLE S	KENDALL, CAROLYN 205 A-1-A #212 SATELLITE BCH. FL	1.3 STREET ADDRESS 205 A1A, #508	
TITLE VPD	GREEN, HAROLD 1585 MAJESTIC OAK DR APOPKA FL	1.4 CITY-ST-ZIP Satellite Beach, Fl. 32937	2.1 TITLE D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE PD	HEDERMAN, CATHIE 205 A-1-A #205 SATELLITE BCH. FL	2.2 NAME Lester Stromme	2.2 NAME
TITLE D	SMITH, HERBERT 205 A-1-A #309 SATELLITE BCH. FL	2.3 STREET ADDRESS 205 A1A, Satellite Beach, Fl. 32937	2.3 STREET ADDRESS
		2.4 CITY-ST-ZIP	3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
			3.2 NAME
			3.3 STREET ADDRESS →
			3.4 CITY-ST-ZIP
			4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
			4.2 NAME
			4.3 STREET ADDRESS
			4.4 CITY-ST-ZIP
			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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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.

SIGNATURE: *Robert Strobert* DATE: 2/8/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR