## 2001 UNIFORM BUSINESS REPORT (UBR) FILED **DOCUMENT # K73658** Feb 15, 2001 8:00 am Secretary of State 1. Entity Name SAND SPRINGS DEVELOPMENT CORPORATION 02-15-2001 90012 045 \*\*\*150 00 Principal Place of Business Mailing Address 3501 BONITA BAY BLVD 3501 BONITA BAY BLVD **BONITA SPRINGS FL 33923** BONITA SPRINGS FL 33923 US LIS 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State 4. FEI Number 65-0105011 Applied For City & State Not Applicable \$8.75 Additional Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CANTWELL, DENNIS J. Street Address (P.O. Box Number is Not Acceptable) 3501 BONITA BAY BLVD **BONITA SPRINGS FL 33923** Zip Code City Fl 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. SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 -9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Addition DPT Change TITLE ☐ Delete TITLE CANTWELL, DENNIS J. CANTWELL, DENNIS J. NAME NAME 10580 WOODCHUCK LN 3651 KEY LIME CT STREET ADDRESS STREET ADDRESS BONITA SPRINGS, FL 34135 **BONITA SPGS FL 34134** CITY-ST-ZIP CITY-ST-7/P Change ☐ Addition ☐ Delete TITLE TITLE CANTWELL, DATRICIA A. CANTWELL, PATRICIA A. NAME 10580 WOODCHUCK LN. 3651 KEY LIME CT STREET ADDRESS STREET ADDRESS BONITA SPRINGS, FL 34135 CITY-ST-7IP **BONITA SPGS FL 34134** CITY-ST-ZIP ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME

13. I 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 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 of true empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE

STREET ADDRESS

CITY-ST-ZIP

ENIS J. CANTWELL, MES 3/10/01 941-947-5/00
Deat OR DIRECTOR

Deat OR DIRECTOR

CR2E034 (10/00)