## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

**DOCUMENT #** 



**FILED** Jan 16, 2003 8:00 am Secretary of State

01-16-2003 90155 005 \*\*\*158.75

I. Entity Name SAND SPRINGS DEVELOPM		
Principal Place of Business	Mailing Address	

3501 BONITA BAY BLVD **BONITA SPRINGS FL 33923** 

3501 BONITA BAY BLVD BONITA SPRINGS FL 33923

		US .		Ì					
21401	Place of Business CORKSCREW VILLAGE LN	3. Mailing Address 21401 CORKSO	REW VIII	AGE LN.	1 10 E49111 911 10 999 11116 91101 911	DI KEKI BIBIL EKI	IFI <b>4</b> 1011 <b>6</b> 1611	118# 8# <b>1</b> # 1 <b>88</b> #	
Suite, Apt <i>Sいて</i>	. #, etc. E 7w0	Suite, Apt. #, etc. Suite 7	wo		CHECK HERE IF MAKING CHANGES				
City & Sta ESTER		City & State  ESTERO_F	~	4.	FEI Number <b>65-0105011</b>		<u> </u>	Applied For Not Applicable	
339a	<u> </u>	Zip 33928	Country US P	<i>A</i> 5.	Certificate of Status Desired		88.75 Ac	dditional	
	6. Name and Address of Current R	Registered Agent	7. Name and Address of New Registered Agent						
			CANT	TWELL: DENNIS J.					
3501 BONITA BAY BLVD BONITA SPRINGS FL 33923			Address (P.O. I	ddress (P.O. Box Number is Not Acceptable)					
DOMITA	Pringo PL 33923		<u>S</u>	LITE	TWO				
. The above	named entity Authority this statement for	the program of the state of	City	ESTE		FL	Zip Cod	とコン	
the obligat	named entity submits this statement for ions of registered agent.	the purpose of changing its r	egistered office o	r registered ag	gent, or both, in the State of Flor	ida. I am fa	miliar with,	and accept	
GNATURE .	4 Manterell	> DENNIS		7 9	-11 DOES	,	1.1.	<b>/</b>	
IGNATORE .	Signature typed or printed name of registered agent and		Registered Agent signal	ture required when r	einstating)	DATE	<u> </u>	<u>u</u>	
Afte	ILE NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$550.00 Payable to Florida Department of \$	State		· <u></u>	Election Campaign Fina     Trust Fund Contribution.			00 May Be	
0.	OFFICERS AND D	IRECTORS	11.	Αſ	DDITIONS/CHANGES TO OFFIC	SEDS AND F	IDECTOR	CWIAA	
TLE	DPT	Delete	TITLE	DTSC		DELIG VIAD F	Change		
AME	CANTWELL, DENNIS J		NAME	CANT	WELL DENNIS	丁 '	≥ Change	Addition	
REET ADDRESS	10580 WOODCHUCK LN		STREET ADDRESS	21520	CUELL, DENNIS BELHAVEN W	4¥		•	
TY-ST-ZIP	BONITA SPRINGS FL 34135		CITY-ST-ZIP		O, FLORIDA 33				
TLE	DVS	Delete	TITLE				Change	☐ Addition	
ME	CANTWELL, PATRICIA A	-	NAME					T VOORION	
REET ANDRESS	10590 W/00004HCV LN			ı					

Cl STREET ADDRESS CITY-ST-7IP **BONITA SPRINGS FL 34135** CITY-ST-ZIP Delete Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Defete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

12. 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 trustee employeered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 in the control of the corporation o

CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ENNIS J. CANTWELL