


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jun 06, 2006 8:00 am
Secretary of State

06-06-2006 90015 038 ****61.25

DOCUMENT # N02825
 1. Entity Name
SAND DRIFT VILLAS HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business Mailing Address
 1560 FLAGLER PKWY 1560 FLAGLER PKWY
 WEST PALM BEACH FL 33411 WEST PALM BEACH FL 33411
 US US

2. Principal Place of Business 3. Mailing Address
 107 Heron Parkway 107 Heron Parkway
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
 Royal Palm Beach, Fl Royal Palm Beach, Fl.
 Zip Country Zip Country
 33411 Palm Beach 33411 Palm Beach

4. FEI Number Applied For
 59-2408504 Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required



1st MOORE CR2E037 (10/05)

6. Name and Address of Current Registered Agent
DAVIS, BARBARA
 107 HERON PARKWAY
 ROYAL PALM BEACH FL 33411

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

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	PD <input type="checkbox"/> Delete
NAME	DONALD, CURLY
STREET ADDRESS	1130-A SAND DRIFT WAY
CITY-ST-ZIP	WEST PALM BEACH FL 33411
TITLE	VTD <input checked="" type="checkbox"/> Delete
NAME	WAYNE, FEINBERG
STREET ADDRESS	1130-C SAND DRIFT WAY
CITY-ST-ZIP	WEST PALM BEACH FL 33411
TITLE	D <input checked="" type="checkbox"/> Delete
NAME	BAILEY, GEORGE
STREET ADDRESS	1150 A SAND DRIFT WAY
CITY-ST-ZIP	WEST PALM BEACH FL 33411
TITLE	ASTD <input type="checkbox"/> Delete
NAME	DAVIS, BARBARA
STREET ADDRESS	107 HERON PARKWAY
CITY-ST-ZIP	ROYAL PALM BEACH FL 33411
TITLE	D <input type="checkbox"/> Delete
NAME	CUTLER, RICHARD
STREET ADDRESS	1100-B SAND DRIFT WAY
CITY-ST-ZIP	WEST PALM BEACH FL 33411
TITLE	D <input type="checkbox"/> Delete
NAME	LEWIS, HOWARD
STREET ADDRESS	1110-A SAND DRIFT WAY
CITY-ST-ZIP	WEST PALM BEACH FL 33411

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	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Robert Quittner
STREET ADDRESS	1151-b Sand Drift Way
CITY-ST-ZIP	West Palm Beach, FL 33411
TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Stanley Stegmiller
STREET ADDRESS	1131-D Sand Drift Way
CITY-ST-ZIP	West Palm Beach, FL 33411
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 Section 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: *Barbara Davis* 5/22/06 561-798-1544