

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR -3 PM 5:55

DOCUMENT # N36686 (6)
1. Corporation Name
SAND PEBBLE POINTE MASTER ASSOCIATION, INC.

Principal Place of Business Mailing Address
P.O. BOX 3370 4800 MILE STRETCH DR HOLIDAY FL 34690 US
P.O. BOX 3370 4800 MILE STRETCH DR HOLIDAY FL 34690 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **02/14/1990** 3a. Date of Last Report **04/26/1994**
4. FBI Number **59-3124781** Applied For (Not Applicable)
5. Certificate of Status Desired **\$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status **\$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

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

9. Name and Address of Current Registered Agent
**REIMER, FREDERICK
4800 MILE STREETH ROAD
HOLIDAY FL 34690**

10. Name and Address of New Registered Agent
81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City **FL** 85. Zip Code

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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS
TITLE **DS**
NAME **KURTZER, THOMAS**
STREET ADDRESS **8150 BRENT STREET #718**
CITY-ST-ZIP **PORT RICHEY FL**
TITLE **DP**
NAME **ENGELHARDT, DORIS**
STREET ADDRESS **4650 BAY BLVD. #1057**
CITY-ST-ZIP **PORT RICHEY FL**
TITLE **DT**
NAME **SIEGGREEN, EML**
STREET ADDRESS **4620 BAY BLVD, 1057**
CITY-ST-ZIP **PORT RICHEY FL**
TITLE **VD**
NAME **MONSELL, MARQUETTE**
STREET ADDRESS **8150 BRENT ST. 748**
CITY-ST-ZIP **PORT RICHEY FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE **DS** Change Addition
1.2 NAME **GRAE Phyllis**
1.3 STREET ADDRESS **8141 Aquilla St. #312**
1.4 CITY-ST-ZIP **Port Richey, FL 34668**
2.1 TITLE **DP** Change Addition
2.2 NAME **PREZKOP, JACK**
2.3 STREET ADDRESS **8141 AQUILLA ST. #342**
2.4 CITY-ST-ZIP **PORT RICHEY, FL 34668**
3.1 TITLE **DT** Change Addition
3.2 NAME **DAVIS, ROBERT**
3.3 STREET ADDRESS **4620 BAY BLVD #1156**
3.4 CITY-ST-ZIP **PORT RICHEY, FL 34668**
4.1 TITLE **DV** Change Addition
4.2 NAME **Riecher, Melvin**
4.3 STREET ADDRESS **4620 BAY BLVD #1126**
4.4 CITY-ST-ZIP **PORT RICHEY, FL 34668**
5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE Change 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 110.07(3)(k), 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 its 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: *[Signature]* **(Pres.)** **3/24/95**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date (Month/Day/Year)