

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000074073

FILED  
Apr 14, 2009  
Secretary of State

Entity Name: SANDS POINTE - MLC, INC.

**Current Principal Place of Business:**

13400 SUTTON PARK DRIVE SOUTH  
SUITE 1402  
JACKSONVILLE, FL 32224

**New Principal Place of Business:**

**Current Mailing Address:**

13400 SUTTON PARK DRIVE SOUTH  
SUITE 1402  
JACKSONVILLE, FL 32224

**New Mailing Address:**

FEI Number: 65-1225251      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MONTGOMERY, MITCHELL R  
13400 SUTTON PARK DRIVE SOUTH  
SUITE 1402  
JACKSONVILLE, FL 32224 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: MONTGOMERY, MITCHELL R  
Address: 13400 SUTTON PARK DRIVE SOUTH SUITE 1402  
City-St-Zip: JACKSONVILLE, FL 32224

Title: VP ( ) Delete  
Name: MONTGOMERY, MITCHELL R II  
Address: 13400 SUTTON PK DR S #1402  
City-St-Zip: JACKSONVILLE, FL 32224

Title: VP ( ) Delete  
Name: RUDOLPH, MAURICE M  
Address: 13400 SUTTON PK DR S #1402  
City-St-Zip: JACKSONVILLE, FL 32224

Title: VP (X) Delete  
Name: PATSY, HITA A  
Address: 13400 SUTTON PARK DR S #1402  
City-St-Zip: JACKSONVILLE, FL 32224

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MITCHELL R. MONTGOMERY

D

04/14/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date