2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2009
Secretary of State

DOCUMENT# N04000002560

Entity Name: SANDS OF CARRABELLE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

104 WEST 4TH AVE
TALLAHASSEE, FL 32303

New Principal Place of Business:

Current Mailing Address:

PO BOX 14976
TALLAHASSEE, FL 32317

New Mailing Address:

FEI Number: 84-1640808 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WOODWARD, THOMAS
104 WEST 4TH AVE
TALLAHASSEE, FL 32303 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

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: WOODWARD, THOMAS B
Address: 104 W 4 AVE
City-St-Zip: TALLAHASSEE, FL 32303

Title: T ( ) Delete
Name: COFFMAN, DEREK
Address: 4100 POE PL
City-St-Zip: TALLAHASSEE, FL 32311

Title: S ( ) Delete
Name: TADDER, KATHY
Address: 4262 LITTLE OSPREY DR
City-St-Zip: TALLAHASSEE, FL 32303

Title: D ( ) Delete
Name: SOLOMAN, SAM
Address: 414 COLDWELL ST
City-St-Zip: QUINCY, FL 32351

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T (X) Change ( ) Addition
Name: COFFMAN, DEREK G
Address: 4110 POE PL
City-St-Zip: TALLAHASSEE, FL 32311

Title: S (X) Change ( ) Addition
Name: TADDER, KATHY
Address: 1901 N. MONROE
City-St-Zip: TALLAHASSEE, FL 32303

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEREK G. COFFMAN MR. 01/16/2009

Electronic Signature of Signing Officer or Director — Date