

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 721506

Entity Name: SANDY WAVES, INC.**Current Principal Place of Business:**3600 OCEAN BEACH BLVD
COCOA BEACH, FL 32931**Current Mailing Address:**200 NORTH FIRST ST
COCOA BEACH, FL 32931 US**FEI Number:** 59-2261279**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RIGERMAN, MARILYN A
200 NORTH FIRST STREET
COCOA BCH., FL 32931 US*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**Officer/Director Detail :**

Title	DVP
Name	SIERRA, TONY
Address	3600 OCEAN BEACH BOULEVARD
City-State-Zip:	COCOA BEACH FL 32931

Title	DP
Name	KABBOORD, DAVID
Address	3600 OCEAN BEACH BLVD
City-State-Zip:	COCOA BEACH FL 32931

Title	DT
Name	DUNWORTH, WILLIAM
Address	3600 OCEAN BEACH BOULEVARD
City-State-Zip:	COCOA BEACH FL 32931

Title	DS
Name	JEANNE , EVANS
Address	3600 OCEAN BEACH BOULEVARD
City-State-Zip:	COCOA BEACH FL 32931

Title	DS
Name	JEANNE , EVANS
Address	3600 OCEAN BEACH BOULEVARD
City-State-Zip:	COCOA BEACH FL 32931

I hereby 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 all other like empowered.

SIGNATURE: DAVID KABBOORD**PRESIDENT****04/14/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date