

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738804

Entity Name: THE SANDS OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**299 N. ATLANTIC AVE.
COCOA BEACH, FL 32931**Current Mailing Address:**200 N 1ST STREET
COCOA BEACH, FL 32931 US**FEI Number: 59-1809873****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**SOILEAU, JOHN
WATSON SOILEAU DELEO & BURGETT
3490 NORTH U.S. HIGHWAY 1
COCOA, FL 32926 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 | SECRETARY, TREASURER |
| Name | TEZEL, MEGHAN |
| Address | 1980 NORTH ATLANTIC AVE #704 |
| City-State-Zip: | COCOA BEACH FL 32931 |

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|-----------------|-------------------------|
| Title | PRESIDENT |
| Name | FOGLE, STEPHEN |
| Address | 299 N ATLANTIC AVE #101 |
| City-State-Zip: | COCOA BEACH FL 32931 |

| | |
|-----------------|-------------------------|
| Title | DIRECTOR |
| Name | ASHWORTH, PETER |
| Address | 299 N ATLANTIC AVE #503 |
| City-State-Zip: | COCOA BEACH FL 32931 |

| | |
|-----------------|--------------------------|
| Title | DIRECTOR |
| Name | MADEN, ROGER |
| Address | 299 N. ATLANTIC AVE #202 |
| 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: STEPHEN FOGLE**PRESIDENT****05/04/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date