

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 755305

**FILED  
Apr 30, 2015  
Secretary of State  
CC7155506619**

**Entity Name:** SANDY COVE CONDOMINIUM ASSOCIATION OF SEMINOLE, INC.

**Current Principal Place of Business:**

564 ORANGE DR. #36  
ALTAMONTE SPRINGS, FL 32701

**Current Mailing Address:**

564 ORANGE DR. #36  
ALTAMONTE SPRINGS, FL 32701 US

**FEI Number:** 59-2050866

**Certificate of Status Desired:** No

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

ASC PROPERTY SERVICES INC.  
3625 SR 419  
SUITE 270  
WINTER SPRINGS, FL 32708 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 DIRECTOR  
Name FULLI, RUTH  
Address PO BOX 196025  
City-State-Zip: WINTER SPRINGS FL 32719

Title PRESIDENT  
Name NORMAN, DEBRA  
Address PO BOX 196025  
City-State-Zip: WINTER SPRINGS FL 32719

Title TR  
Name WERNER, EDWARD A  
Address PO BOX 196025  
City-State-Zip: WINTER SPRINGS FL 32719

Title VP  
Name LANGLOTZ, RICHARD  
Address PO BOX 196025  
City-State-Zip: WINTER SPRINGS FL 32719

Title SD  
Name FIRMANI, JOSEPH  
Address PO BOX 196025  
City-State-Zip: WINTER SPRINGS FL 32719

*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: EDWARD A WERNER**

**TR**

**04/30/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date