

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759071

Entity Name: SANDS POINT HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1167 OCEAN SHORE BLVD
ORMOND BEACH, FL 32176

Current Mailing Address:

PO BOX 291844
PORT ORANGE, FL 32129 US

FEI Number: 59-2254593

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SUSAN GLAD BOOKKEEPING, LLC
157 BRANDY HILLS DRIVE
PORT ORANGE, FL 32129 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 P
Name WARE, DOLORES
Address 1347 ARDEN DRIVE
City-State-Zip: MARIETTA GA 30008

Title DIRECTOR
Name NOVAK, ROBERT
Address 1167 OCEAN SHORE BLVD
City-State-Zip: ORMOND BEACH FL 32176

Title SECRETARY
Name SOWELL, BRENDA
Address P O BOX1272
City-State-Zip: JESUP GA 31598

Title VP
Name ERICSON, BARBARA
Address 2314 W SUGAR CREEK DR
City-State-Zip: LAKELAND FL 33811-1462

Title TD
Name SHEPPARD, JO
Address 1167 OCEAN SHORE BLVD # 7
City-State-Zip: ORMOND BEACH FL 32176

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: JO SHEPPARD

TREASURER

04/29/2019

Electronic Signature of Signing Officer/Director Detail

Date