

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03388

**Entity Name:** SANDPIPER WOODS TOWNHOMES ASSOCIATION, INC.

**FILED**  
**Apr 22, 2013**  
**Secretary of State**  
**CC6017220606**

**Current Principal Place of Business:**

C/O PHOENIX MANAGEMENT SERVICES  
4800 N STATE ROAD 7 #105  
LAUDERDALE LAKES, FL 33319

**Current Mailing Address:**

C/O PHOENIX MANAGEMENT SERVICES  
4800 N STATE ROAD 7 #105  
LAUDERDALE LAKES, FL 33319 US

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

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

THE FRYDMAN LAW GROUP, PLLC  
100 S. PINE ISLAND ROAD  
#120  
PLANTATION, FL 33324 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 PD  
Name MEYER, LINDA  
Address 4800 N STATE ROAD 7 #105  
City-State-Zip: LAUDERDALE LAKES FL 33319

Title TD  
Name ALONZI, CYNTHIA  
Address 4800 N STATE ROAD 7 #105  
City-State-Zip: LAUDERDALE LAKES FL 33319

Title VPD  
Name D'ALESSIO, JOHN  
Address 4800 N STATE ROAD 7 #105  
City-State-Zip: LAUDERDALE LAKES FL 33319

Title SD  
Name GIORDANO, JAN  
Address 4800 N STATE ROAD 7 #105  
City-State-Zip: LAUDERDALE LAKES FL 33319

Title D  
Name STEVENS, LILI  
Address 4800 N STATE ROAD 7 #105  
City-State-Zip: LAUDERDALE LAKES FL 33319

Title D  
Name BLAIS, BEVERLY  
Address 4800 N STATE ROAD 7 #105  
City-State-Zip: LAUDERDALE LAKES FL 33319

Title DIRECTOR  
Name DOLCE, CHRISTOPHER  
Address C/O PHOENIX MANAGEMENT SERVICES  
4800 N STATE ROAD 7 #105  
City-State-Zip: LAUDERDALE LAKES FL 33319

*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: LINDA MEYER**

**P**

**04/22/2013**

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

\_\_\_\_\_  
Date