

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000000611

**Entity Name:** SANDHILL PRESERVE AT ARBOR MEADOWS HOMEOWNERS' ASSOCIATION, INC.

**FILED**  
**Apr 23, 2014**  
**Secretary of State**  
**CC0716018867**

**Current Principal Place of Business:**

811 MABBETTE STREET  
KISSIMMEE, FL 34741

**Current Mailing Address:**

811 MABBETTE STREET  
KISSIMMEE, FL 34741 US

**FEI Number:** 20-3288731

**Certificate of Status Desired:** No

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

ASSOCIATION SOLUTIONS OF CENTRAL FL, INC  
811 MABBETTE STREET  
KISSIMMEE, FL 34741 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 VP, DIRECTOR

Title ST, DIRECTOR

Name OULOUALI, OTHMAN

Name JOLLY, THOMAS

Address 2319 SAND ARBOR CIRCLE

Address 2325 SAND ARBOR CIRCLE

City-State-Zip: ORLANDO FL 32824

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*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:** THOMAS JOLLY

**SECRETARY/TREASURER** 04/23/2014

Electronic Signature of Signing Officer/Director Detail

Date