

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17000007544

Entity Name: SANDY ACRES ASSOCIATION, INC.**Current Principal Place of Business:**17000 PERDIDO KEY DRIVE
PENSACOLA, FL 32507**Current Mailing Address:**17000 PERDIDO KEY DRIVE
PENSACOLA, FL 32507 US**FEI Number:** 46-0906133**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**BROOKS, THOMAS LOWELL JR.
17000 PERDIDO KEY DRIVE
LOT 1
PENSACOLA, FL 32507 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:** THOMAS LOWELL BROOKS JR.

02/08/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

| | |
|-----------------|------------------------------------|
| Title | DIRECTOR |
| Name | LEAVITT, ROBERT JR. |
| Address | 17000 PERDIDO KEY DRIVE LOT 3 |
| City-State-Zip: | PENSACOLA FL |
| Title | CHAIRMAN |
| Name | GRAHAM, FRANK |
| Address | 9710 HAMILTON CREEK DRIVE SOUTH |
| City-State-Zip: | MOBILE AL 36695 |

| | |
|-----------------|-----------------------|
| Title | DIRECTOR |
| Name | ALEXANDER, GLENN |
| Address | 120 RICHMOND ROAD |
| City-State-Zip: | DAPHNE AL 36526 |
| Title | SECRETARY/TREASURER |
| Name | MATHIS, TERESA |
| Address | 16651 RIDGELINE DRIVE |
| City-State-Zip: | BAY MINETTE AL 36507 |

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: FRANK GRAHAM

CHAIRMAN

02/08/2022

Electronic Signature of Signing Officer/Director Detail

Date