

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 10, 2020
Secretary of State
3982613086CC

Entity Name: SANDPIPER ISLE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O GULF BREEZE MANAGEMENT SERVICES, INC.
8910 TERRENE COURT STE. 200
BONITA SPRINGS, FL 34135

Current Mailing Address:

C/O GULF BREEZE MANAGEMENT SERVICES, INC.
8910 TERRENE COURT STE. 200
BONITA SPRINGS, FL 34135 US

FEI Number: 65-0651232

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WEIDNER, RALPH L CAM
C/O GULF BREEZE MANAGEMENT SERVICES, INC.
8910 TERRENE COURT STE. 200
BONITA SPRINGS, FL 34135 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: RALPH L. WEIDNER

04/10/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, DIRECTOR
Name WITT, SHARON
Address C/O GULF BREEZE MANAGEMENT SERVICES, INC.
 8910 TERRENE COURT STE. 200
City-State-Zip: BONITA SPRINGS FL 34135

Title VP, DIRECTOR
Name WOOLBERT, WILLARD
Address C/O GULF BREEZE MANAGEMENT SERVICES, INC.
 8910 TERRENE COURT STE. 200
City-State-Zip: BONITA SPRINGS FL 34135

Title SECRETARY, DIRECTOR
Name JEAN, STEVEN
Address C/O GULF BREEZE MANAGEMENT SERVICES, INC.
 8910 TERRENE COURT STE. 200
City-State-Zip: BONITA SPRINGS FL 34135

Title TREASURER, DIRECTOR
Name RAMSAY, SCOTT
Address C/O GULF BREEZE MANAGEMENT SERVICES, INC.
 8910 TERRENE COURT STE. 200
City-State-Zip: BONITA SPRINGS FL 34135

Title DIRECTOR
Name FROMELT, PAMELA K
Address C/O GULF BREEZE MANAGEMENT SERVICES, INC.
 8910 TERRENE COURT STE. 200
City-State-Zip: BONITA SPRINGS FL 34135

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: SHARON WITT

PRESIDENT

04/10/2020

Electronic Signature of Signing Officer/Director Detail

Date