

2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M13000001388

Entity Name: SAND PROPERTY MANAGEMENT, LLC

Current Principal Place of Business:

366 S 10TH AVE
WAITE PARK, MN 56387

FILED
Apr 27, 2017
Secretary of State
CC0138919082

Current Mailing Address:

366 S 10TH AVE
WAITE PARK, MN 56387 US

FEI Number: 45-4210750

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TYRONE SUITES, L.L.C.
3831 TYRONE BLVD
104
ST PETERSBURG, FL 33709 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

Authorized Person(s) Detail :

Title MGR
Name THELEN, JAMIE J
Address 366 S 10TH AVE
City-State-Zip: WAITE PARK MN 56387

Title VP
Name SHELLY, THOMAS E
Address 3831 TYRONE BLVD., SUITE 104
City-State-Zip: ST. PETERSBURG FL 33709

Title VP
Name SAND, LEO M
Address 366 S 10TH AVE
City-State-Zip: WAITE PARK MN 56387

Title AUTHORIZED REPRESENTATIVE
Name SNELLING, STEVEN D
Address 366 S 10TH AVE
City-State-Zip: WAITE PARK MN 56387

Title VP
Name PETERSON, JEFFREY P
Address 366 S 10TH AVE
City-State-Zip: WAITE PARK MN 56387

Title CFO
Name NIETERS, SARAH B
Address 366 S 10TH AVE
City-State-Zip: WAITE PARK MN 56387

Title SECRETARY
Name SAND, NICOLE D
Address 366 S 10TH AVE
City-State-Zip: WAITE PARK MN 56387

Title VP
Name WENDEL, MICHAEL C
Address 366 S 10TH AVE
City-State-Zip: WAITE PARK MN 56387

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: STEVEN D SNELLING

**AUTHORIZED
REPRESENTATIVE**

04/27/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date