

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 714254

FILED
Apr 26, 2007
Secretary of State

Entity Name: SANDPIPER BAY HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

MORNINGSIDE LIBRARY
2410 MORTNINGSIDE BLVD.
PORT SAINT LUCIE, FL 34952 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 7111
PORT ST. LUCIE, FL 349857111 US

New Mailing Address:

FEI Number: 74-3004549

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARTDEGEN, WILLIAM J
3073 SE TREASURE ISLAND RD.
PORT SAINT LUCIE, FL 34952 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FELDMAN, SUSAN W
Address: 1762 SE CANORA ROAD
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: VP () Delete
Name: HARRIS, DONALD
Address: 1726 WEST MORELAND BLVD.
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: T () Delete
Name: BERES III, CHARLES
Address: 2512 SE ANCHORAGE COVE, B3
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: P () Delete
Name: JAMES, JAMES
Address: 3124 SE OVERBROOK DRIVE
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: S () Delete
Name: HARTDEGEN, BILL
Address: 3073 SE TREASURE ISLAND
City-St-Zip: PORT ST. LUCIE, FL

Title: D () Delete
Name: IRIZARRY, FRANK
Address: 1459 SE WESTMORELAND BLVD
City-St-Zip: PORT ST. LUCIE, FL 34952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: FELDMAN, SUSAN W
Address: 1762 SE CANORA ROAD
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: D (X) Change () Addition
Name: HARRIS, DONALD
Address: 1726 WEST MORELAND BLVD.
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
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Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CHARLES BERES III

T

04/26/2007

Electronic Signature of Signing Officer or Director

Date