

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2008 8:00 am
Secretary of State

03-19-2008 90019 012 ****61.25

DOCUMENT # 719008

1. Entity Name
SANDY HOOK ASSOCIATION, INC.



Principal Place of Business
**62 SANDY HOOK RD. SOUTH
SARASOTA, FL 34242-1622 US**

Mailing Address
**62 SANDY HOOK RD. SOUTH
SARASOTA, FL 34242-1622 US**

4004801J



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02022008 Chg-NP CR2E037 (12/06)

4. FEI Number
59-2087220

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WOLFF, PETER
62 SANDY HOOK RD. S
SARASOTA, FL 34242-1622**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ ☐ Delete
NAME **WEISS, BERNICE MS**
STREET ADDRESS **126 SANDY HOOK RD. S**
CITY-ST-ZIP **SARASOTA, FL**

TITLE ☒ Change ☐ Addition
NAME **VP**
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **P HAYES, KATHERINE MS**
STREET ADDRESS **24 ROCKWELL LANE**
CITY-ST-ZIP **SARASOTA, FL 34242**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **WOLFF, PETER MR**
STREET ADDRESS **62 SANDY HOOK RD S**
CITY-ST-ZIP **SARASOTA, FL 342421622**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **D BOND, DONALD MR**
STREET ADDRESS **44 ROCKWELL LANE**
CITY-ST-ZIP **SARASOTA, FL 34242**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ ☐ Delete
NAME **FRIGNOCA, RICK MR**
STREET ADDRESS **148 SANDY HOOK RD. N**
CITY-ST-ZIP **SARASOTA, FL 34242**

TITLE ☒ Change ☐ Addition
NAME **VP**
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **D PULLMAN, CRAIG MR**
STREET ADDRESS **44 SANDY HOOK RD S**
CITY-ST-ZIP **SARASOTA, FL 34242**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Craig Pullman Treasurer

3/17/08

941-544-3535