

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 721506

FILED
Jun 30, 2009
Secretary of State

Entity Name: SANDY WAVES, INC.

Current Principal Place of Business:

3600 OCEAN BEACH BLVD
COCOA BEACH, FL 32931 US

New Principal Place of Business:

Current Mailing Address:

200 NORTH FIRST ST
COCOA BEACH, FL 32931 US

New Mailing Address:

FEI Number: 59-2261279 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MARYANN SMITH
104 W. ALACHUA LN.
#706
COCOA BCH., FL 32931 US

Name and Address of New Registered Agent:

RIGERMAN, MARILYN A
200 NORTH FIRST STREET
COCOA BCH., FL 32931 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: MARILYN A. RIGERMAN

06/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MARYANN SMITH
Address: 104 W. ALACHUA LN.
City-St-Zip: COCOA BCH., FL 32931

Title: DST () Delete
Name: WILLIAM DUNWORTH
Address: 23 WILLIAM AVE.
City-St-Zip: APOPKA, FL 32712

Title: DP () Delete
Name: KUBBOARD, DAVID
Address: 3600 OCEAN BEACH BLVD
City-St-Zip: COCOA BEACH, FL 32931

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SMITH, MARYANN
Address: 104 WEST ALACHUA LANE
City-St-Zip: COCOA BCH., FL 32931

Title: DVP (X) Change () Addition
Name: EVANS, JOHN
Address: 3600 OCEAN BEACH BOULEVARD
City-St-Zip: COCOA BEACH, FL 32931

Title: DP (X) Change () Addition
Name: KABBOORD, DAVID
Address: 3600 OCEAN BEACH BLVD
City-St-Zip: COCOA BEACH, FL 32931

Title: DST () Change (X) Addition
Name: DUNWORTH, WILLIAM
Address: 3600 OCEAN BEACH BOULEVARD
City-St-Zip: COCOA BEACH, FL 32931

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: DAVID KABBOORD

P

06/30/2009

Electronic Signature of Signing Officer or Director

Date