2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 31, 2002 8:00 am
Secretary of State
01-31-2002 90075 027 ****61.25

DOCUMENT # 725915

1. Entity Name

SANDS POINT CONDOMINIUM I, INC.

Principal Place of Business	Mailing Address
8361 SANDS PT. BLVD. TAMARAC FL 33321	8361 SANDS PT. BLVD. TAMARAC FL 33321

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1541639 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

BLUM, DAVID A
8341 SANDS POINT BLVD.
TAMARAC FL 33321

7. Name and Address of New Registered Agent

Name SCHNEIDER JOSEPH G.
Street Address (P.O. Box Number is Not Acceptable) 8321 SANDS POINT BLVD
City TAMARAC **FL** Zip Code 33321

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.

SIGNATURE DAVID A. BLUM 1/15/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BLUM, DAVID A 8341 SANDS POINT BLVD. TAMARAC FL 33321	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SCHNEIDER, JOSEPH PD 8321 SANDS PT. BLVD TAMARAC FL 33321	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD SCHNEIDER, JOSEPH 8321 SANDS PT BLVD TAMARAC FL 33321	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DELMONICO LOUIS VD 8331 SANDS POINT BLVD TAMARAC FL 33321	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T PALMIERE, MICHELE 8341 SANDS POINT BLVD TAMARAC FL 33321	☐ Delete SAME	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~T~~ BARBARA WINTER S 8321 SANDS POINT TAMARAC FL 33321	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MOREAU, GIL 8341 SANDS POINT BLVD TAMARAC FL	☐ Delete SAME	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	BEN GREEN D 8321 SAND PT BLVD TAMARAC FL 33321	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WEINTRAUB, JOE 8341 SANDS POINT BLVD. TAMARAC FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	[illegible] D 8341 SANDS PT TAMARAC FL 33321	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DELMONICO, LOUIS 8331 SANDS POINT BLVD. TAMARAC FL 33321	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/01)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 REQUIRED 1-15-02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR