

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728476

FILED
Jan 17, 2011
Secretary of State

Entity Name: SANDPIPER OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

5501 SOUTH ATLANTIC AVENUE
NEW SMYRNA BEACH, FL 32169

New Principal Place of Business:

Current Mailing Address:

5501 SOUTH ATLANTIC AVENUE
NEW SMYRNA BEACH, FL 32169

New Mailing Address:

FEI Number: 59-1486262

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORENO, DIANE B
5501 SOUTH ATLANTIC AVENUE
NEW SMYRNA BEACH, FL 32169 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: PD
Name: SEFCIK, JOE
Address: 2420 NORFOLK ROAD
City-St-Zip: ORLANDO, FL 32803

Title: VPD
Name: BROWN, DON
Address: 1127 EDGEWATER DRIVE
City-St-Zip: ORLANDO, FL 32804

Title: SD
Name: JOHNSON, SCOTT
Address: 750 ALBA DRIVE
City-St-Zip: ORLANDO, FL 32804

Title: TD
Name: SUTTON, DUSTY
Address: 1239 AUDUBON PLACE
City-St-Zip: ORLANDO, FL 32804

Title: D
Name: HADLEY, RALPH
Address: 120 SPRING COVE TRAIL
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: D
Name: IVEY, ROGER TOMMY
Address: 5501 SOUTH ATLANTIC AVENUE #102
City-St-Zip: NEW SMYRNA BEACH, FL 32169

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 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 all other like empowered.

SIGNATURE: JOE SEFCIK

PD

01/17/2011

Electronic Signature of Signing Officer or Director

Date