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Jan 20 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **737942** (3)
1. Corporation Name
SANDS POINT CONDOMINIUM ASSOCIATION OF LONGBOAT KEY, INC.

Principal Place of Business Mailing Address
**100 SANDS POINT RD
LONGBOAT KEY FL 34228** **100 SANDS POINT RD
LONGBOAT KEY FL 34228**

3. Date Incorporated or Qualified
01/28/1977

4. FEI Number **59-1735267**
Applied For ☐
Not Applicable ☒

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Zip
24 Country 25 Country 29 Country 30 Country

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

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

7. Is this nonprofit corporation a homeowners association?
☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**HANSEN, JULIAN R
100 SANDS PT RD - UNIT 314
LONGBOAT KEY FL 34228**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	GOODMAN, ROBERT	
STREET ADDRESS	100 SANDS PT. RD. 211	
CITY-ST-ZIP	LONGBOAT KEY FL	
TITLE	S	<input type="checkbox"/> DELETE
NAME	WINSTON, JACK	
STREET ADDRESS	100 SANDS PT RD # 114	
CITY-ST-ZIP	LONGBOAT KEY FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	WILLIAM FUSSNER	
STREET ADDRESS	100 SANDS PT RD # 117	
CITY-ST-ZIP	LONGBOAT KEY FL	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	WEST, DOUGLAS	
STREET ADDRESS	100 SANDS PT RD #324	
CITY-ST-ZIP	LONGBOAT KEY FL	
TITLE	VPD	<input type="checkbox"/> DELETE
NAME	VERBEKE, HENRY	
STREET ADDRESS	100 SANDS PT. RD. 106	
CITY-ST-ZIP	LONGBOAT KEY FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	TSIGOUNIS, STANLEY	
STREET ADDRESS	100 SANDS POINT ROAD #124	
CITY-ST-ZIP	LONGBOAT KEY FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	IZZO, CARMEL	
1.3 STREET ADDRESS	100 SANDS POINT RD #319	
1.4 CITY-ST-ZIP	LONGBOAT KEY, FL	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Sandra B. Mortham* **REQUIRED**

January 6, 1998 **383-3702** (941)

CR2E037 (10/97)