

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738306

FILED
Apr 21, 2009
Secretary of State

Entity Name: SANDPIPER ASSOCIATION, INC.

Current Principal Place of Business:

731 S. FIRST STREET
2-B
JACKSONVILLE BEACH, FL 32250

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 51173
JACKSONVILLE BEACH, FL 32240

New Mailing Address:

FEI Number: 59-1903914

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KLOSE, ROBERT C
731 S. FIRST ST.
UNIT 3E
JACKSONVILLE BEACH, FL 32250 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: D () Delete
Name: KLOSE, ROBERT
Address: 731 SOUTH 1ST ST #3E
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: T () Delete
Name: ERVING, CINDY
Address: 731 SOUTH 1ST DT #2B
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: PD () Delete
Name: GLOWE, JERRY
Address: 12870 JEBB ISLAND CIR. S.
City-St-Zip: JACKSONVILLE, FL 32224

Title: VP () Delete
Name: RODRIGUEZ, SHIRLEY
Address: 2226 SMULLIAN TRL. N.
City-St-Zip: JACKSONVILLE, FL 32217

Title: S () Delete
Name: BOBLENZ, LES
Address: 731 S. 1ST. STREET UNIT 3-B
City-St-Zip: JACKSONVILLE BEACH, FL 32250.

Title: D () Delete
Name: EVANS, MARIA
Address: 4103 HIDDEN BEACH DR N
City-St-Zip: JACKSONVILLE, FL 32257

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: BOBLENZ, LES
Address: 731 S. 1ST. STREET UNIT 3-B
City-St-Zip: JACKSONVILLE BEACH, FL 32250.

Title: S (X) Change () Addition
Name: EVANS, MARIA
Address: 4103 HIDDEN BEACH DR N
City-St-Zip: JACKSONVILLE, FL 32257

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: CINDY ERVING

T

04/21/2009

Electronic Signature of Signing Officer or Director

Date