

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738472

FILED
Jan 30, 2009
Secretary of State

Entity Name: SANDS POINT CONDOMINIUM III, INC.

Current Principal Place of Business:

8361 SANDS POINT BLVD.
TAMARAC, FL 33321

New Principal Place of Business:

Current Mailing Address:

8361 SANDS POINT BLVD.
TAMARAC, FL 33321

New Mailing Address:

FEI Number: 59-1795017

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARE III, JACK
8361 SANDS PT BLVD.
TAMARAC, FL 33321 US

Name and Address of New Registered Agent:

KAYE & BENDER, P
6261 NW 6TH WAY
FT. LAUDERDALE, FL 33309 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: MICHAEL BENDER

01/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HARE III, JACK
Address: 8361 SANDS POINT BLVD
City-St-Zip: TAMARAC, FL 33321

Title: VPD () Delete
Name: ADAMSON, MICHELLE
Address: 8361 SANDS POINT BLVD.
City-St-Zip: TAMARAC, FL 33321

Title: T () Delete
Name: JOANNE, DELORENZO
Address: 8361 SANDS POINT BLVD
City-St-Zip: TAMARAC, FL 33321

Title: D () Delete
Name: DIAZ, JORGE
Address: 8380 SANDS PT BLVD
City-St-Zip: TAMARAC, FL 33321

Title: D () Delete
Name: JOHNSON, PATRICIA
Address: 8361 SANDS POINT BLVD
City-St-Zip: TAMARAC, FL 33321

Title: S (X) Delete
Name: ARIAS, THALIA
Address: 8361 SANDS PT BLVD
City-St-Zip: TAMARAC, FL 33321

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GREGORY, HEWITT P
Address: 8370 SANDS POINT BLVD H201
City-St-Zip: TAMARAC, FL 33321

Title: S (X) Change () Addition
Name: THALIA, ARIAS
Address: 8370 SANDS POINT BLVD H207
City-St-Zip: TAMARAC, FL 33321

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

Title: VP (X) Change () Addition
Name: DIAZ, JORGE
Address: 8380 SANDS PT BLVD
City-St-Zip: TAMARAC, FL 33321

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

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

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: GREGORY PAUL HEWITT

PRES

01/30/2009

Electronic Signature of Signing Officer or Director

Date