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FILED

May 01 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 746976 (0)

1. Corporation Name

SANDALWOOD ESTATES PROPERTY OWNER'S ASSOCIATION,  
INC.

Principal Place of Business

Mailing Address

210 DEERWOOD LANE  
FT. PIERCE FL 34947  
US210 DEERWOOD LANE  
FT. PIERCE LF 34947-3430  
US3. Date Incorporated or Qualified  
04/30/19793a. Date of Last Report  
02/09/1996

4. FEI Number

59-2776229

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution☐\$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes☒Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc.

22 City &amp; State

27 City &amp; State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DREW, KARON  
2816 JEFFERSON PKWY  
FT. PIERCE FL 34946

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

Karon Drew Sec/Treas

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

(NOTE: Registered Agent signature required when reinstating)

4/29/97

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE  
NAME THOMAS, TODD  
STREET ADDRESS 89 PINWOOD LANE  
CITY-ST-ZIP FT. PIERCE FL1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIPTITLE ST ☐ DELETE  
NAME DREW, KARON  
STREET ADDRESS 2816 JEFFERSON PKWY  
CITY-ST-ZIP FT PIERCE FL2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIPTITLE D ☐ DELETE  
NAME ANDERSON, JOHN  
STREET ADDRESS 212 DEERWOOD LANE  
CITY-ST-ZIP FT PIERCE FL3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIPTITLE V ☒ DELETE  
NAME VESTERLUND, STEIG  
STREET ADDRESS 308 ROSEWOOD DR.  
CITY-ST-ZIP FT PIERCE FL4.1 TITLE ☐ Change ☒ Addition  
4.2 NAME Kenneth Whisner, Jr.  
4.3 STREET ADDRESS 210 Deerwood Lane  
4.4 CITY-ST-ZIP Ft. Pierce, FLTITLE D ☐ DELETE  
NAME DOWIS, GLENDA  
STREET ADDRESS 300 DEERWOOD LANE  
CITY-ST-ZIP FT PIERCE FL5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIPTITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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:

Karon Drew Sec/Treas

4/29/97

561-464-4900

CR2E037 (9/96)