2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # 748244

1. Entity Name

SANDALWOOD CONDOMINIUM MOTEL ASSOCIATION, INC.



FILED
Apr 16, 2007 08:00 AN
Secretary of State

Principal Place of Business

17100 GULF BLVD

CITY-ST-ZIP

N REDINGTON BCH, FL 33708

Mailing Address

17100 GULF BLVD

N REDINGTON BCH, FL 33708



04102007 No Chg-NP

CR2E037 (4/06)

4. FEI Number 59-1963113

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

WHITELEY, GEORGE 17100 GULF BLVD N REDINGTON BEACH, FL 33708

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|--|--|---|-----------------------|--------------------------------|-----------------------------------|
| | | P | : | inter a second | |
| 8. The above the obliga | e named entity submits this statement for the pations of registered agent. | ourpose of changing its registered of | office or re | gistered agent, or bot | th, in the State of Florida. I am |
| SIGNATURE. | Signature, typed or printed name of registered agent and title | if applicable (NOTE: Registered Ag | ent signature | required when reinstating) | DATE |
| ٠ | Filing Fee is \$61.25 Due by May 1, 2007 | Election Campaign Financin Trust Fund Contribution. | ° 🗆 | \$5.00 May Be Added to Fees | |
| 10. | OFFICERS AND DIREC | CTORS | | | The second |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD WHITELEY, GEORGE 3 W. ENDFIELD FEASTERVILLE TREVOSE, PA 1905 | 3 | • | | eparting and services |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD EWING, GINGER 15407 DEERGLEN DR TAMPA, FL 33624 | | , , , | | daligadynasik disambe begin |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TD KENNY, ETHEL 11770-5TH STREET, E. SAINT PETERSBURG, FL 33706 | | \$ | DO | NOT WRITI |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VD TOMBERG, MARVIN 323 W NORTH ST ITASCA, IL 60143 | | | IÑ: | THIS SPACE |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D MEYERS, DIXIE 656 BROMLEY CRESCENT RD BROMLEY, KY 41017 | | | | |
| TITLE NAME STREET ADDRESS | | - 1 or 1 o | et _e ti | | |

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.