

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2007
Secretary of State

DOCUMENT# 749147

Entity Name: SARASOTA SANDS OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2150 BENJAMIN FRANKLIN BLVD
SARASOTA, FL 34236

New Principal Place of Business:

2150 BEN FRANKLIN DRIVE
SARASOTA, FL 34236

Current Mailing Address:

2150 BENJAMIN FRANKLIN BLVD
SARASOTA, FL 34236

New Mailing Address:

2150 BEN FRANKLIN DRIVE
SARASOTA, FL 34236

FEI Number: 59-2193992 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OAKS, DAVID K
407 EAST MARION AVE, SUITE 101
PUNTA GORDA, FL 33950 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: PRES () Delete
Name: AUBE, J.T. ROBERT
Address: 2150 BEN FRANKLIN DR
City-St-Zip: SARASOTA, FL 34236

Title: V-PR () Delete
Name: NICHOLS, ROBERT
Address: 2150 BEN FRANKLIN DR
City-St-Zip: SARASOTA, FL 34236

Title: TREA () Delete
Name: GROSSMAN, ALVIN
Address: 2150 BEN FRANKLIN DR
City-St-Zip: SARASOTA, FL 34236

Title: SECR () Delete
Name: DISNEY, ELEANOR
Address: 2150 BEN FRANKLIN DR
City-St-Zip: SARASOTA, FL 34236

Title: D () Delete
Name: LANG, DOUG
Address: 2150 BEN FRANKLIN DR
City-St-Zip: SARASOTA, FL 34236

Title: D () Delete
Name: MILSTEAD, WILLIAM G
Address: 2150 BEN FRANKLIN DR
City-St-Zip: SARASOTA, FL 34236

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V-PR (X) Change () Addition
Name: HARDING, CONSTANCE
Address: 2150 BEN FRANKLIN DR
City-St-Zip: SARASOTA, FL 34236

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: JT ROBERT AUBE

PRES

01/10/2007

Electronic Signature of Signing Officer or Director

Date