


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 22, 2006 8:00 am
Secretary of State

03-22-2006 90021 025 ****61.25

DOCUMENT # 755922			
1. Entity Name THE SANDS, A CONDOMINIUM, SECTION I ASSOCIATION, INC.			
Principal Place of Business 1111 SE FEDERAL HWY STE 100 STUART, FL 34994 US		Mailing Address 1111 SE FEDERAL HWY STE 100 STUART, FL 34994 US	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
ADVANTAGE PROPERTY MANAGEMENT 1111 SE FEDERAL HWY STE 100 STUART, FL 34994		Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	PD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARQUISETTE, DORETTA	NAME	
STREET ADDRESS	3210S. LAKEVIEW CIR #202	STREET ADDRESS	
CITY-ST-ZIP	FORT PIERCE, FL 34949	CITY-ST-ZIP	
TITLE	VPD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHWARZ, JOHN	NAME	
STREET ADDRESS	3212 S. LAKEVIEW CIR	STREET ADDRESS	
CITY-ST-ZIP	FT PIERCE, FL 34949	CITY-ST-ZIP	
TITLE	SD <input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RICHARDS, DORIS	NAME	SD CUMPTON, Robert
STREET ADDRESS	3215 S LAKEVIEW CIRCLE, #201	STREET ADDRESS	3210 S. LAKEVIEW CIRCLE # 3-201
CITY-ST-ZIP	FORT PIERCE, FL 34949	CITY-ST-ZIP	Ft. Pierce, FL 34949
TITLE	D <input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SAVINO, LESLIE	NAME	TD HEAPHY, Michael
STREET ADDRESS	3212 LAKEVIEW CIR	STREET ADDRESS	3218 S. LAKEVIEW CIRCLE # 7-201
CITY-ST-ZIP	FT. PIERCE, FL 34949	CITY-ST-ZIP	Ft. Pierce, FL 34949
TITLE	VTPD <input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BARKMAN, RONALD	NAME	D
STREET ADDRESS	3216 S LAKEVIEW CIR #5-202	STREET ADDRESS	
CITY-ST-ZIP	FT. PIERCE, FL 34949	CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MEYER, CAMILLE	NAME	D HEALY, Roy
STREET ADDRESS	3210 LAKEVIEW CIRCLE	STREET ADDRESS	3210 S. LAKEVIEW CIRCLE # 3-203
CITY-ST-ZIP	FT. PIERCE, FL 34949	CITY-ST-ZIP	Ft. Pierce, FL 34949
12. I hereby certify that the information supplied with this filing 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.			
SIGNATURE: <u>Doretta B. Marquette, President</u>		Date: <u>3/10/06</u> Daytime Phone #: <u>772-461-8491</u>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			
DORETTA B. MARQUETTE			

ATTACHMENT
2008952
#755922

0 Addition
OMANS, GWEN
3207 S. LAKEVIEW Circle # 6-203
FT. PIERCE, FL 34949