

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90326 015 ****61.25

DOCUMENT # 761418

1. Entity Name
SANDALWOOD VILLAGE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
**500 FOREST LAKE BLVD
DAYTONA BEACH, FL 32119 US**

Mailing Address
**500 FOREST LAKE BLVD
DAYTONA BEACH, FL 32119 US**

40072017



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04122006

Chg-NP

CR2E037 (11/05)

City & State

City & State

4. FEI Number
59-2356339

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**RANSBOTTON, LUELLEN
991 OLD MILL RUN
ORMOND BCH, FL 32174**

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

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

(NOTE: Registered Agent signature required when re-registering)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$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 **D** ☒ Delete
NAME **LANDO, JOAN**
STREET ADDRESS **136 W SANDALWOOD COURT**
CITY-ST-ZIP **DAYTONA BEACH, FL 32119**

TITLE **P** ☐ Change ☒ Addition
NAME **Lois Webber**
STREET ADDRESS **168 Sandalwood**
CITY-ST-ZIP **Daytona Beach FL 32119**

TITLE **P** ☒ Delete
NAME **WEBBER, LAURIE**
STREET ADDRESS **168 SANDALWOOD CIR**
CITY-ST-ZIP **DAYTONA BCH, FL 32119**

TITLE **S** ☐ Change ☒ Addition
NAME **Ines Smith-Reyes**
STREET ADDRESS **112 Sandalwood**
CITY-ST-ZIP **Daytona Beach FL 32119**

TITLE **D** ☐ Delete
NAME **KOZLOWSKI, STEVE**
STREET ADDRESS **176 SANDALWOOD COURT**
CITY-ST-ZIP **DAYTONA BEACH, FL 32119**

TITLE **D** ☐ Change ☒ Addition
NAME **Janice mechteneimer**
STREET ADDRESS **124 Sandalwood**
CITY-ST-ZIP **Daytona Beach FL 32119**

TITLE **D** ☐ Delete
NAME **TAYLOR, JOAN**
STREET ADDRESS **SANDALWOOD COURT**
CITY-ST-ZIP **DAYTONA BEACH, FL 32119**

TITLE **D** ☐ Change ☒ Addition
NAME **Jeanette Wagner**
STREET ADDRESS **174 Sandalwood**
CITY-ST-ZIP **Daytona Beach, FL 32119**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Change ☒ Addition
NAME **Martha Masing, II**
STREET ADDRESS **180 Sandalwood**
CITY-ST-ZIP **Daytona Beach FL 32119**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Lois Webber

4-21-06

386-307-1507

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #