

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761418

FILED
Feb 03, 2009
Secretary of State

Entity Name: SANDALWOOD VILLAGE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

500 FOREST LAKE BLVD
DAYTONA BEACH, FL 32119 US

New Principal Place of Business:

7 FLORIDA PARK DR SUITE C
PALM COAST, FL 32137 US

Current Mailing Address:

POST OFFICE BOX 731814
ORMOND BEACH, FL 32173 US

New Mailing Address:

FEI Number: 59-2356339 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ANNON, FRED JR
SOUTHERN STATE MGMT., GROUP
7 FLORIDA PARK DR STE C
PALM COAST, FL 32137 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: P () Delete
Name: WEBBER, LOIS
Address: 168 SANDALWOOD
City-St-Zip: DAYTONA BEACH, FL 32119

Title: TD () Delete
Name: ARMITAGE, JANICE
Address: 124 W SADALWOOD CT
City-St-Zip: DAYTONA BEACH, FL 32119

Title: DVP () Delete
Name: KOZLOWSKI, STEVE
Address: 176 SANDALWOOD COURT
City-St-Zip: DAYTONA BEACH, FL 32119

Title: D () Delete
Name: CALDER, STEVEN
Address: 100 W SADALWOOD CT
City-St-Zip: DAYTONA BEACH, FL 32119

Title: D () Delete
Name: LANDO, JOAN
Address: 136 W SANDALWOOD CT
City-St-Zip: DAYTONA BEACH, FL 32119

Title: DS (X) Delete
Name: WAGNER, JEANETTE
Address: 174 SANDALWOOD
City-St-Zip: DAYTONA BEACH, FL 32119

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TD (X) Change () Addition
Name: CALDER, STEVEN
Address: 100 W SANDALWOOD CT
City-St-Zip: DAYTONA BEACH, FL 32119

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

Title: SD (X) Change () Addition
Name: WAGNER, JEANETTE
Address: 152 W SANDALWOOD CT
City-St-Zip: DAYTONA BEACH, FL 32119

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 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: FRED ANNON, JR.

AGNT

02/03/2009

Electronic Signature of Signing Officer or Director

Date