

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761922

FILED
Jan 19, 2009
Secretary of State

Entity Name: SANDORAL CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3399 NW 72 AVENUE
SUITE 215
MIAMI, FL 33122 US

New Principal Place of Business:

Current Mailing Address:

3399 NW 72 AVENUE
SUITE 215
MIAMI, FL 33122 US

New Mailing Address:

FEI Number: 59-2229779

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUGGER, ROBERT A SR
3399 NW 72 AVENUE
SUITE 215
MIAMI, FL 33122 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: TD () Delete
Name: HERALD, MARIAN
Address: 8005 LAKE DR #212
City-St-Zip: MIAMI, FL 33166

Title: D () Delete
Name: DELANEY, TOM
Address: 8005 LAKE DR #401
City-St-Zip: MIAMI, FL 33166

Title: SD () Delete
Name: COGORNIO, MARGARITA
Address: 8005 LAKE DRIVE #301
City-St-Zip: MIAMI, FL 33166

Title: PD () Delete
Name: WASHKEWICZ, LINDA
Address: 8005 LAKE DR #406
City-St-Zip: MIAMI, FL 33166

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: MARIAN HERALD

TD

01/19/2009

Electronic Signature of Signing Officer or Director

Date