FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F35503

(4)

SAND DOLLAR VILLAS, INC.

FILED May 01 1997 8:00am Secretary of State

<u>.</u> 									
Principal Place of Business Mailing Address					·			LOLI BIBLIC DIBLI	
3325 CORAL PARK DRIVE P.O. BOX 607 BRUNSWICK GA 31521 BRUNSWICK GA 31 US US			i21-0 6 07						
					3. Date Incorporated or Qualified 05/20/1981	3a. Date of Last Report 04/30/1996			
	Place of Business	2a, Mailing Address	2a, Mailing Address			4. FEI Number	-	Ar	oplied For
21		26	··			59-2106920			ot Applicable
Suite, Apt. #, etc.		Suite, Apt #, etc.	27			5. Cortificate of Status Desired		\$8.75 . Fee Re	Additional equired
City & Sta	te	City & State			Election Campaign Financing Trust Fund Contribution	П	\$5.00	May Bo to Fees	
Zip	Country	7ip	Country		· -· · · · <u> </u>	8. This corporation has liability for in	√ancible.		
24	25	<u>⊢</u> -₁ '	30				Yes [. 199.032
-	9. Name and Address of Currer			10. Name and Address of New Registered Agent					
POOLE, WESLEY R									
4 NORTH 2ND STREET, STE 200			82 Street Add			ess (P.O. Box Number is Not Acceptab	e)		
FE	RNANDINA BEACH FL 32034		ļ	83					
1									
			l	84	City		FL	85 Zip	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the office or registered agont, or both, in the State of Florida. Such change was authorize					named corpo	pration submits this statement for the property beard of directors. I beard a second	urpose of	changing d	ls registered
agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE	Signature, typed or printed name of registered ag-	The state of the s			n signature required	duties - Catholica	DATE		
12.		ID DIRECTORS	13.	J AGE	i signatore required	ADDITIONS/CHANGES TO OFFIC		DIBECTOR	RS IN 12
TITLE			11 11	ILF.				Change	Addition
NAME	GORDON, JEAN		1.2 NAMÉ		Ì				
STREET ADDRESS	RESS 4223 13TH STREET EB		1.3 STREET ADORESS		ADORESS				
CITY-ST-ZIP	ST SIMONS ISLAND,GA0		1.4 CITY-1		1 - 2 1P				
TITLE	PD	DELETE	211011					Change	Addition
NAME	TOLLISON, H. KENNETH J			2.2 NAME					
STREET ADDRESS			2.3 \$18		ADDRESS				
CITY-ST-ZIP					51 - ZIP	. 1		T 3 01	
TITLE	=		3.1 11					Change	Addilion
NAME	TOLLISON, HUGH K SR ss 3325 CORAL PARK DR		1	3.2 NAME					
STREET ADDRESS	BRUNSWICK, GA 0		3 3 51REE						
CITY-ST-ZIP TITLE	Distriction, and	T DELETE	4.1 FU		31-2IP			Change	Addition
NAME	1	<u></u>	4. 2 NAM[
STREET ADDRESS			4.3 STREE		ADDRESS				
CITY-ST-ZIP			4.4 CHY-		1 - ZiP				{
TITLE		DELETE	5.1 Till E					Change	Addition
NAME	1		5.2 NAME						
STREET ADDRESS			5.3 STREE		ADDRESS				ĺ
CITY-ST-ZIP			54 CHY-3		T - ZIP				
TALE		☐ DELETE	611	TLE				Change	Addition
NAME			6.2 NAME						
STREET ADDRESS	S 6.3		6.3 S I	6.3 STREET ADORESS					
CITY-ST-ZIP	64		6 4 CI	TY-S	1 - ZIP	5-0	C Carl		

I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicates on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block /2 or Florida Statutes and that my name appears in Block /2 or Florida Statutes.

12.22.Qn

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