2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F96000006120

1. Entity Name

SANDLER AT ANDROS ISLE, INC.



Mailing Address

448 VIKING DRIVE, STE 220 VIRGINIA BEACH, VA 23452

Principal Place of Business

448 VIKING DRIVE, STE 220 VIRGINIA BEACH, VA 23452

FILED Apr 19, 2004 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

04072004 No Chg-P CR2E034 (10/03)

4. FEI Number 54-1823320

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525

DO NOT WRITE IN THIS SPACE

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.					
SIGNATURESignature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		Election Campaign Financ Trust Fund Contribution,	sing 🗆	\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CRY-ST-ZIP	PCD SANDLER, STEVEN B 1357 HARRIS ROAD VIRGINIA BEACH, VA			•	Unnnon119010 n4/19/04-80082-021 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD SANDLER, ARTHUR B 536 REDGATE AVENUE NORFOLK, VA		_		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP			! :		
12. I 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 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 eath; that I am an officer or director					

12. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, Truther certify that he information indicated on this 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/04

757-463-5000

Daytime Phone #