

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **G07500 (3)**

1. Corporation Name

SANDPIPER POINT DEVELOPMENT COMPANY, INC.



Principal Place of Business

Mailing Address

646 LOVEJOY ROAD
P O BOX 1689
FT WALTON BCH FL 32549

646 LOVEJOY ROAD
P O BOX 1689
FT WALTON BCH FL 32549

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. No.

26 State, Apt. No.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**DENNEY, RICHARD M
25 WALTER MARTIN AVENUE, STE 201
FT WALTON BEACH FL 32548**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

3. Date Incorporated or Qualified

11/08/1982

3a. Date of Last Report

03/24/1995

4. FET Number

59-2238908

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

Yes No

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0605 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and I accept the obligations of Section 607.0605, Florida Statutes.

SIGNATURE

OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

- 12. 1 NAME: **V** DELETE
- 2 NAME: **LIFNER, JEAN**
- 3 STREET ADDRESS: **646 LOVEJOY ROAD**
- 4 CITY, STATE, ZIP: **FT WALTON BCH, FL 00000**
- 5 TITLE: **P** DELETE
- 6 NAME: **LIFNER, FRANK**
- 7 STREET ADDRESS: **646 LOVEJOY ROAD**
- 8 CITY, STATE, ZIP: **FT WALTON BCH, FL 00000**
- 9 TITLE: **ST** DELETE
- 10 NAME: **BEARDEN, EARL**
- 11 STREET ADDRESS: **1810 LEWIS TURNER BLVD**
- 12 CITY, STATE, ZIP: **FT WALTON BCH, FL 00000**
- 13 TITLE: DELETE
- 14 NAME: DELETE
- 15 STREET ADDRESS: DELETE
- 16 CITY, STATE, ZIP: DELETE
- 17 NAME: DELETE
- 18 STREET ADDRESS: DELETE
- 19 CITY, STATE, ZIP: DELETE
- 20 NAME: DELETE
- 21 STREET ADDRESS: DELETE
- 22 CITY, STATE, ZIP: DELETE

- 13. 1 TITLE: Change Addition
- 2 NAME: Change Addition
- 3 STREET ADDRESS: Change Addition
- 4 CITY, STATE, ZIP: Change Addition
- 5 TITLE: Change Addition
- 6 NAME: Change Addition
- 7 STREET ADDRESS: Change Addition
- 8 CITY, STATE, ZIP: Change Addition
- 9 TITLE: Change Addition
- 10 NAME: Change Addition
- 11 STREET ADDRESS: Change Addition
- 12 CITY, STATE, ZIP: Change Addition
- 13 TITLE: Change Addition
- 14 NAME: Change Addition
- 15 STREET ADDRESS: Change Addition
- 16 CITY, STATE, ZIP: Change Addition
- 17 TITLE: Change Addition
- 18 NAME: Change Addition
- 19 STREET ADDRESS: Change Addition
- 20 CITY, STATE, ZIP: Change Addition

14. I do hereby certify that the information supplied by the filer herein is true and correct and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information included on this annual report or supplementary annual 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 person or persons empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Book 12 of Page 13 of the annual report or supplementary annual report.

SIGNATURE: *FRANK LIFNER* Pres 1-17-95 704-243-7109

CR2E034 (12/95)