

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G92989

FILED
Apr 06, 2009
Secretary of State

Entity Name: SANDSTONE PROPERTIES, INC.

Current Principal Place of Business:

1712 SILVER LAKE RD
TALLAHASSEE, FL 32310 US

New Principal Place of Business:

Current Mailing Address:

1712 SILVER LAKE RD
TALLAHASSEE, FL 32310 US

New Mailing Address:

FEI Number: 59-2443827 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBERTS, MICHAEL W
1712 SILVER LAKE RD.
TALLAHASSEE, FL 32310 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ROBERTS, MICHAEL W
Address: 3038 W LAKESHORE DR
City-St-Zip: TALLAHASSEE, FL 32312

Title: ST () Delete
Name: CURLEE, DIANE M
Address: 8 SAN MARCOS DR
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: D () Delete
Name: COCCIOLONE, KATHY L
Address: 6101 34TH STREET, WEST #31H
City-St-Zip: BRADONTON, FL 34210

Title: DV () Delete
Name: FRANCIS, BRENDA R
Address: 215 MEADOW RIDGE DR.
City-St-Zip: TALLAHASSEE, FL 32312

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DIANE M. CURLEE

ST

04/06/2009

Electronic Signature of Signing Officer or Director

_____ Date