

FILED
May 02, 2008 8:00 am
Secretary of State

05-02-2008 90021 050 ***138.75

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L05000017864

1. Entity Name
SANDS GROUP LLC



Principal Place of Business
8431 CASA DEL RIO LANE
FT MYERS, FL 33919 US

Mailing Address
8431 CASA DEL RIO LANE
FT MYERS, FL 33919 US

60038251



03042008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-2388056

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

FUGATT, DAN L
8431 CASA DEL RIO LANE
FT. MYERS, FL 33919

**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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when rechartering)

DATE

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	FUGATT, DAN L
STREET ADDRESS	8431 CASA DEL RIO LANE
CITY- ST- ZIP	FT MYERS, FL 33919
TITLE	MGRM
NAME	FUGATT, SHARON D <i>RESIGNED</i>
STREET ADDRESS	8431 CASA DEL RIO LANE
CITY- ST- ZIP	FT MYERS, FL 33919
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

DATE

Daytime Phone

3-16-08