

**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

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**FILED**

2007 SEP 18 AM 2:06

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # L67004**  
1. Entity Name  
SANDS EXTERIOR DESIGNS, INC.



Principal Place of Business      Mailing Address  
PO BOX 4507      PO BOX 4507  
N.FT. MYERS, FL 33918 US      N. FT. MYERS, FL 33918 US

**DO NOT WRITE IN THIS SPACE**



07052007 No Chg-P CR2E034 (11/05)

4. FEI Number      Applied For  
**65-0190803**      Not Applicable

5. Certificate of Status Desired            **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent  
  
SANDS, KEVIN  
1668 TENNESSEE AVENUE  
N.FT. MYERS, FL 33903

**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 \_\_\_\_\_      **600109558096**  
Signature, typed or printed name of registered agent and title if applicable.      (NOTE: Registered Agent signature required when reinstating)      DATE **09/18/07--01019--002 \*\*150.00**

**FILE NOW!!! FEE IS \$150.00**  
**Due by September 14, 2007**

9. Election Campaign Financing Trust Fund Contribution.            **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	PST
NAME	SANDS, KENNETH K
STREET ADDRESS	P O BOX 4507 N/A
CITY-ST-ZIP	NORTH FORT MYERS, FL
TITLE	D
NAME	SANDS, KENNETH K JR.
STREET ADDRESS	PO BOX 4507 N/A
CITY-ST-ZIP	NORTH FORT MYERS, FL
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**

12. 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 or supplemental 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 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: *Kenneth K Sands*      Date 7/10/07  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Daytime Phone #

9/19/07