

2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Apr 22, 2005
Secretary of State

DOCUMENT# N03000002980

Entity Name: SANDPIPER COVE HOMEOWNERS ASSOCIATION AT AQUARINA, INC.**Current Principal Place of Business:**211 ASH AVE
MELBOURNE BEACH, FL 32951**New Principal Place of Business:**826 AQUARINA BLVD
MELBOURNE BEACH, FL 32951**Current Mailing Address:**P.O. BOX 510247
MELBOURNE BEACH, FL 32951**New Mailing Address:**826 AQUARINA BLVD
MELBOURNE BEACH, FL 32951**FEI Number:** 57-1163580**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**PARKER, JEFF
211 ASH AVE
MELBOURNE BEACH, FL 32951 US**Name and Address of New Registered Agent:**SIMONET, PATRICIA
826 AQUARINA BLVD
MELBOURNE BEACH, FL 32951 US

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: PATRICIA M. SIMONET

04/22/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: PARKER, JEFF
Address: 211 ASH AVE
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: DV () Delete
Name: WINKER, DAN
Address: 119 SIGNATURE DR
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: DST () Delete
Name: STIFFLEMIRE, JULIE
Address: 3799 1ST AVE
City-St-Zip: VALKARIA, FL 32959

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SIMONET, PATRICIA
Address: 826 AQUARINA BLVD
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: D (X) Change () Addition
Name: AMAREL, JOHN
Address: 836 AQUARINA BLVD
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: D (X) Change () Addition
Name: SCHMIDTHORST, SUSAN
Address: 802 AQUARINA BLVD
City-St-Zip: MELBOURNE BEACH, FL 32951

I hereby certify that the information supplied with this filing does not qualify for the 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PATRICIA M. SIMONET

D

04/22/2005

Electronic Signature of Signing Officer or Director

Date