

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001433

FILED
Apr 29, 2005
Secretary of State

Entity Name: SANDPOINT SOCIAL CLUB, INC.

Current Principal Place of Business:

4573 HELENA DRIVE
TITUSVILLE, FL 32780

New Principal Place of Business:

Current Mailing Address:

4573 HELENA DRIVE
TITUSVILLE, FL 32780

New Mailing Address:

FEI Number: 90-0150423

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SECOR, PAUL
4573 HELENA DRIVE
TITUSVILLE, FL 32780 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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SECOR, PAUL
Address: 4573 HELENA DRIVE
City-St-Zip: TITUSVILLE, FL 32780

Title: D () Delete
Name: BUTCHER, BILL
Address: 500 SOUTH PARK AVENUE
City-St-Zip: TITUSVILLE, FL 32780

Title: D () Delete
Name: GARRISON, JIM
Address: 149 HARRISON STREET
City-St-Zip: TITUSVILLE, FL 32780

Title: D () Delete
Name: JOHNSON, WALT
Address: 2000 S. WASHINGTON AVENUE
City-St-Zip: TITUSVILLE, FL 32780

Title: D () Delete
Name: MATRONI, AL
Address: P.O. BOX 197
City-St-Zip: TITUSVILLE, FL 32780

Title: D () Delete
Name: SHARKEY, RAY
Address: 4245 ABBEY LANE
City-St-Zip: TITUSVILLE, FL 32780

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:

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 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: WALT JOHNSON

D

04/29/2005

Electronic Signature of Signing Officer or Director

Date