

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jul 17, 2007
Secretary of State**

DOCUMENT# N04000008689

Entity Name: SANDY LANE MASTER ASSOCIATION, INC.

Current Principal Place of Business:

ATTN: GANSEVOORT HOTEL GROUP
100 RING RD. WEST, SUITE 101
GARDEN CITY, NY 11530

New Principal Place of Business:

Current Mailing Address:

ATTN: GANSEVOORT HOTEL GROUP
100 RING RD. WEST, SUITE 101
GARDEN CITY, NY 11530

New Mailing Address:

FEI Number: 42-1643633 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

LIEBER, OREN ESQ
% RITTER, RITTER & ZARETSKY, LLP
555 NE 15 ST - STE 100
MIAMI, FL 33132 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: KOSSMAN, MURRAY
Address: 2399 COLLINS AVE
City-St-Zip: MIAMI BEACH, FL 33139

Title: D () Delete
Name: ACHENBAUM, MICHAEL
Address: 2399 COLLINS AVE
City-St-Zip: MIAMI BEACH, FL 33139

Title: D () Delete
Name: ACHENBAUM, WILLIAM
Address: 2399 COLLINS AVE
City-St-Zip: MIAMI BEACH, FL 33139

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:

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

SIGNATURE: MURRAY KOSSMAN

D

07/17/2007

Electronic Signature of Signing Officer or Director

Date