

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008689

FILED
Feb 10, 2012
Secretary of State

Entity Name: SANDY LANE MASTER ASSOCIATION, INC.

Current Principal Place of Business:

2377 COLLINS AVE.
ATTEN:ASSOCIATION MANAGEMENT OFFICE
MIAMI BEACH, FL 33139

New Principal Place of Business:

2397 COLLINS AVE.
ATTEN:ASSOCIATION MANAGEMENT OFFICE
MIAMI BEACH, FL 33139

Current Mailing Address:

2377 COLLINS AVE.
ATTEN:ASSOCIATION MANAGEMENT OFFICE
MIAMI BEACH, FL 33139

New Mailing Address:

2397 COLLINS AVE.
ATTEN:ASSOCIATION MANAGEMENT OFFICE
MIAMI BEACH, FL 33139

FEI Number: 42-1643633

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROGEL, DAVID H ESQ
BECKER & POLIAKOFF, P.A.
121 ALHAMBRA PLAZA, 10TH FLOOR
CORAL GABLES, FL 33134 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: PD
Name: DOUGLAS, CAMILLE J
Address: 40 W. 57TH STREET 23RD FLOOR
City-St-Zip: NEW YORK, NY 10019

Title: STD
Name: COLKET, KEVIN
Address: 591 W. PUTNAM AVENUE
City-St-Zip: GREENWICH, CT 06830

Title: VPD
Name: COLAK, MATO
Address: 2301 COLLINS AVENUE
City-St-Zip: MIAMI BEACH, FL 33139

I hereby 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 all other like empowered.

SIGNATURE: CAMILLE DOUGLAS

PD

02/10/2012

Electronic Signature of Signing Officer or Director

_____ Date