## **2008 NOT-FOR-PROFIT CORPORATION**

## **ANNUAL REPORT**

**FILED** Feb 20, 2008 8:00 am Secretary of State

| 1. Entity Nam<br>THE RES  |   |  |  |  |                                   |  |  |                      |
|---|---|--|--|--|-----------------------------------|--|--|----------------------|
| DOCUMENT # N0500006155  1. Entity Name THE RESIDENCES AT SANDPEARL RESORT OWNER'S ASSOCIATION, INC.   |   |  |  |  | ULUI                              | 0009 022 ****                                      | ***61.25   |                      |
|   | e of Business<br>TH ST N STE 200<br>URG, FL 33704   |  | Mailing Address<br>2201 FOURTH ST N STE 200<br>ST PETERSBURG, FL 33704   |  |                                   |  |  |                      |
| 2. Principal P  | Place of Business - No P.O. Box #   | 3. Mailing Address                                       |  |  |                                   |  |  |                      |
| Suite, Apt. #, etc.   |   | Suite, Apt. #, etc.                                      | Suite, Apt. #, etc.  |  | Chg-NP                            | CR2E037 (12  | /06)   |                      |
| City & State  |   | City & State   | City & State   |  | 50                                |  | Applied<br>Not Appl                              |                      |
| Zip   | Country   | Zip  | Country  | 5. Certificate of  |                                   |  | 5 Additional equired                             |                      |
|   | 6. Name and Address of Current  | Registered Agent   | 1  | 7. Name and Ad   | dress of New Re                   | egistered Agent                                    |  |                      |
| CHEEZEM   | 1, J. MICHAEL   |  | Name   |  |                                   |  |  |                      |
| 2201 FOU  | RTH ST N STE 200<br>RSBURG, FL 33704  |  | Street Ac  | ddress (P.O. Box Number is   | s Not Acceptable                  |  |  |                      |
|   | •   |  | City   |  |                                   | FL Zi  | p Code   |                      |
|   |   |  |  |  |                                   | ГЩ   |  |                      |
|   |   |  |  |  |                                   |  |  |                      |
| SIGNATURE   | Signature, typind or printed name of registered ager  |  |  | re required when reinstating)  |                                   | DATE   |  | <del>-</del>         |
| SIGNATURE   |   | 9. Election Camp<br>Trust Fund Co                        | paign Financing  | \$5.00 May Be Added to Fees  |                                   | DATE<br>lake check paya<br>lda Department          |  | <del></del>          |
| SIGNATURE   | Signature, typed or printed name of registored ager Filling Fee is \$61.25  | 9. Election Camp<br>Trust Fund Co                        | paign Financing  | \$5.00 May Be  | Flor                              | ake check paya<br>ida Department                   | t of State                                       |                      |
|   | Filing Fee is \$61.25 Due by May 1, 2008  OFFICERS AND D  | 9. Election Camp<br>Trust Fund Co                        | paign Financing ontribution.  11.  | \$5.00 May Be Added to Fees  ADDITIONS/CHAN                          | Elori<br>GES TO OFFICE            | lake check paya<br>ida Department                  | of State   | Addition             |
| 10. TITLE NAME  | Filing Fee is \$61.25 Due by May 1, 2008  OFFICERS AND D  PD  COOPER, GAIL M  | 9. Election Camp<br>Trust Fund Co                        | paign Financing ontribution.  11. TITLE NAME   | \$5.00 May Be Added to Fees  ADDITIONS/CHAN D Touchton, V            | Flori<br>GES TO OFFICE<br>Valter  | lake check paya<br>ida Department                  | of State   | Addition             |
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| 10.  TITLE  NAME  STREET ADDRESS  | Filing Fee is \$61.25 Due by May 1, 2008  OFFICERS AND D  PD  COOPER, GAIL M 2201 FOURTH ST N STE 200   | 9. Election Camp<br>Trust Fund Co                        | paign Financing ontribution.  11. TITLE NAME STREET ADDRESS  | \$5.00 May Be Added to Fees  ADDITIONS/CHAN D Touchton, V            | GES TO OFFICE<br>Valter<br>Street | lake check pays ida Department RS AND DIRECTO      | t of State<br>DRS IN 10<br>hange 【基              | Addition             |
| 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP   | Filing Fee is \$61.25 Due by May 1, 2008  OFFICERS AND D  COOPER, GAIL M 2201 FOURTH ST N STE 200 ST PETERSBURG, FL 33704   | 9. Election Camp Trust Fund Co                           | paign Financing ontribution.  11.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  | \$5.00 May Be Added to Fees  ADDITIONS/CHAN D Touchton, V 11 Baymont | GES TO OFFICE<br>Valter<br>Street | lake check pays ida Department RS AND DIRECTO      | t of State<br>DRS IN 10<br>hange 【基              |                      |
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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 617, 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.

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

Gail M. Cooper

☐ Change

Addition