

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006270

FILED
Feb 05, 2009
Secretary of State

Entity Name: THE SANDS MARINA ASSOCIATION, INC.

Current Principal Place of Business:

2282 N. US HWY. ONE
FT. PIERCE, FL 34946

New Principal Place of Business:

2282 N US HIGHWAY ONE
FT. PIERCE, FL 34946

Current Mailing Address:

2282 N. US HWY. ONE
FT. PIERCE, FL 34946

New Mailing Address:

2282 N US HIGHWAY ONE
FT. PIERCE, FL 34946

FEI Number: 20-3109472

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HESSEE, MARK
2282 N. US HWY ONE
FT. PIERCE, FL 34946 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 () Delete
Name: RIPPE, MARTIN
Address: 3225 S LAKEVIEW CIR 105
City-St-Zip: FORT PIERCE, FL 34949

Title: VD () Delete
Name: VERDES, GEORGE
Address: 3221 S LAKEVIEW CIR 106
City-St-Zip: FORT PIERCE, FL 34949

Title: STD () Delete
Name: HOLSCLAW, RICHARD
Address: 3259 LAKESHORE DR
City-St-Zip: FORT PIERCE, FL 34949

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: STD (X) Change () Addition
Name: HOLSCLAW, RICHARD
Address: 3259 LAKESHORE DRIVE
City-St-Zip: FORT PIERCE, FL 34949

Title: D () Change (X) Addition
Name: HESSEE, MARK
Address: 6545 FLORIDANA AVENUE
City-St-Zip: MELBOURNE BEACH, FL 32951

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: MARTIN RIPPE

PRES

02/05/2009

Electronic Signature of Signing Officer or Director

Date