2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011191

FILED Apr 16, 2007 Secretary of State

Entity Name: SANDS AREA NEIGHBORHOOD ASSOCIATION INCORPORATED

Current Principal Place of Business: New Principal Place of Business: 2808 SW 45TH STREET CAPE CORAL, FL 33914 **Current Mailing Address: New Mailing Address:** 2808 SW 45TH STREET CAPE CORAL, FL 33914 FEI Number: 16-1739514 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SCHNEIDER, ELLEN R 2808 SW 45TH STREET US CAPE CORAL, FL 33914 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition SCHNEIDER, HERBERT K Name: Name: 2808 SW 45TH STREET Address: Address: CAPE CORAL, FL 33914 City-St-Zip: City-St-Zip: Title: () Delete Title: (X) Change () Addition OWEN, DAVID B Name: HAHN, NICHOLAS Name: Address: 2809 SW 45TH STREET Address: 2830 SW 43TH STREET City-St-Zip: CAPE CORAL, FL 33914 City-St-Zip: CAPE CORAL, FL 33914 Title: DIR () Delete Title: () Change () Addition PROSNAK, SUZANNE M Name: Name: 2633 SW 43RD TERRACE Address: Address: City-St-Zip: CAPE CORAL, FL 33914 City-St-Zip: Title: DIR () Delete Title: () Change () Addition Name: HAHN, CAROL A Name: 2830 SW 43RD STREET Address: Address: City-St-Zip: CAPE CORAL, FL 33914 City-St-Zip: Title: () Delete Title: DIR (X) Change () Addition COMANESCU, ROBERT J FOSTER, KENNETH Name: Name: 2805 SW 45TH STREET 2701 SW 46TH STREET Address: Address: City-St-Zip: CAPE CORAL, FL 33914 City-St-Zip: CAPE CORAL, FL 33914 Title: () Delete Title: () Change () Addition GAFFIN JOAN V Name: Name: Address: 4222 SW 26TH AVENUE Address: CAPE CORAL, FL 33914 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: HERBERT K. SCHNEIDER P 04/16/2007