

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05998

FILED
Jan 24, 2009
Secretary of State

Entity Name: SANDPOINT CONDOMINIUM MANAGEMENT ASSOCIATION, INC.

Current Principal Place of Business:

2615 SOUTH ATLANTIC AVE
DAYTONA BEACH SHORES, FL 321185636

New Principal Place of Business:

Current Mailing Address:

2615 SOUTH ATLANTIC AVE
DAYTONA BEACH SHORES, FL 321185636

New Mailing Address:

FEI Number: 59-2474796

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MALIK, DEAN
2615 S ATLANTIC AVE
APT 8I
DAYTONA BEACH SHORES, FL 32018 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: VP () Delete
Name: FARMOR, GREG
Address: STARMOUNT DRIVE
City-St-Zip: LAKELAND, FL 33810

Title: VP () Delete
Name: HUKILL, PAT
Address: 2615 S. ATLANTIC UNIT 1D
City-St-Zip: DAYTONA BEACH, FL 32118

Title: T () Delete
Name: MURRAY, LOIS
Address: PO BOX 519
City-St-Zip: KECHI, KA 47553

Title: PD () Delete
Name: MALIK, DEAN,
Address: 2615 S ATLANTIC AVE APT 8I
City-St-Zip: DAYTONA B SHORES, FL

Title: SD () Delete
Name: HALLMARK, MIKE,
Address: 272 HWY 92 DR
City-St-Zip: DALLAS, GA

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: FARMER, GREG
Address: STARMOUNT DRIVE
City-St-Zip: LAKELAND, FL 33810

Title: VP (X) Change () Addition
Name: HUKILL, PAT
Address: 2445 S. PALMENTO CIRCLE
City-St-Zip: SOUTH DAYTONA, FL 32119

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

Title: PD (X) Change () Addition
Name: MALIK, DEAN,
Address: 2615 S ATLANTIC AVE APT 8I
City-St-Zip: DAYTONA B SHORES, FL 32118

Title: SD (X) Change () Addition
Name: HALLMARK, MIKE,
Address: 33 HIRMAN ACWORTH HWY
City-St-Zip: DALLAS, GA 30157

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: NINA PANDELOS

MGR.

01/24/2009

Electronic Signature of Signing Officer or Director

Date