2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N06000006698

Jul 27, 2009 Secretary of State

Entity Name: SANDPIPER VILLAGE CONDOMINIUM AT SWEETWATER BY DEL WEBB ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

9831 DEL WEBB PKWY JACKSONVILLE, FL 32256

Current Mailing Address: New Mailing Address:

9039 DELL WEBB PKWY JACKSONVILLE, FL 32256

FEI Number: 86-1170647 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:

STERLING FIN. & MGMT., INC. 6620 SOUTHPOINT DR S JACKSONVILLE, FL 32216 US

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:

Title: PD () Delete Title: PD (X) Change () Addition
Name: GENOVESE, BILL Name: CLARK, GREGORY
Address: 5210 BELEORT RD STE 400

Address: 5210 BELFORT RD STE 400
City-St-Zip: JACKSONVILLE, FL 32256

Name: CEANN, GREGORT
Address: 5210 BELFORT RD STE 400
City-St-Zip: JACKSONVILLE, FL 32256

Title: STD () Delete Title: () Change () Addition

 Name:
 BRAUN, CHRISTINE
 Name:

 Address:
 5210 BELFORT RD STE 400
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32256
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 SEPE, STEVE
 Name:

 Address:
 9831 DEL WEBB PKWY #1405
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32256
 City-St-Zip:

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: GREGORY CLARK PD 07/27/2009