2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2008
Secretary of State

DOCUMENT# N06896

Entity Name: SANDESTIN HARBOUR POINT CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

215 GRAND BLVD
SUITE 200
MIRAMAR BEACH, FL 32550 US

New Principal Place of Business:

Current Mailing Address:

215 GRAND BLVD
SUITE 200
MIRAMAR BEACH, FL 32550 US

New Mailing Address:

FEI Number: 59-2481325 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GORMLEY, TERRY P
215 GRAND BLVD
SUITE 200
MIRAMAR BEACH, FL 32550 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: DV ( ) Delete
Name: ADCOCK, JIMMY C
Address: 7799 WIND SONG DR
City-St-Zip: TRUSSVILLE, AL 35173 US

Title: DST ( ) Delete
Name: FAILLA, TOMMY
Address: 4125 PALMYRA STREET
City-St-Zip: NEW ORLEANS, LA 70119

Title: D ( ) Delete
Name: VIENER, BETTY
Address: 204 EVANGELINE DRIVE
City-St-Zip: MANDEVILLE, LA 70471 US

Title: DP ( ) Delete
Name: RODGERS, JOHN
Address: 2628 CHRCHILL DOWNS CIR
City-St-Zip: CHATTANOOGA, TN 37421 US

Title: D ( ) Delete
Name: LOSAPIO, CARL
Address: 192 WOOD RUN
City-St-Zip: ROCHESTER, NY 14612

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DV (X) Change ( ) Addition
Name: FAILLA, TOMMY
Address: 4125 PALMYRA STREET
City-St-Zip: NEW ORLEANS, LA 70119

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

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

Title: DST (X) Change ( ) Addition
Name: LOSAPIO, CARL
Address: 192 WOOD RUN
City-St-Zip: ROCHESTER, NY 14612

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: CARL LOSAPIO S 04/24/2008

Electronic Signature of Signing Officer or Director — Date