


**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jan 22, 2008 08:00 AM
Secretary of State**

DOCUMENT # N07459 1. Entity Name SANDSPUR HOMEOWNERS ASSOCIATION, INC.	
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Principal Place of Business 5075 LEEWARD DRIVE PENSACOLA, FL 32507	Mailing Address 5075 LEEWARD DRIVE PENSACOLA, FL 32507
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01172008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TERRY, WANDA L
5055 LEEWARD DR.
PENSACOLA, FL 32507

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

000000791382
01/23/08-80074-001 61.25

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P TERRY, ROSS R 5055 LEEWARD DR. PENSACOLA, FL 32507
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WEATHERHEAD, ROLAND 5069 LEEWARD DR. PENSACOLA, FL 32507
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**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Wanda L Terry **WANDA L Terry** 1-7-08 850-492-2006
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #