2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2000 8:00 am
Secretary of State
05-03-2000 90096 001 ****61.25

DOCUMENT # N07638

1. Entity Name

SANDERLING PROPERTY OWNER'S ASSOCIATION, INC.

Principal Place of Business	Mailing Address
~~9301 N A1A STE 4~~ ~~VERO BEACH FL 32963~~ US	9301 N A1A. STE 4 VERO BEACH FL 32963-4574 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2345 SANDERLING LN	(same)
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: VERO BEACH FLA	City & State
Zip: 32963 Country: INDIAN RIVER	Zip / Country

4. FEI Number: 59-2592950 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
COLLINS, THOMAS H 9301 N A1A STE 4 VERO BEACH FL 32963	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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.

SIGNATURE _____ DATE 4/20/00

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD COLLINS, THOMAS H. 9300 HWY A1A, SUITE 201 VERO BEACH FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT & TREASURY PAUL MACDONALA 9301 A-1-A SUITE 4 VERO BEACH FLA. 32963	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT SHERRY, MARSHA 9301 N A1A, STE 4 VERO BEACH FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TRICIA STODDARD 9301 A-1-A SUITE 4 SEC. Vero Beach FLA. 32963	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS WELLS, DIANE 9301 N A1A, STE 4 VERO BEACH FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Thomas N. Collins 9301 A-1-A Suite 4 VERO Beach FLA. 32963	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/99)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: SIGNATURE REQUIRED 4/20/00 561-~~582~~-3736

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #