

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000007890

FILED
May 03, 2010
Secretary of State

Entity Name: SAND SOLDIERS OF AMERICA, INC.

Current Principal Place of Business:

8606 GOVERNMENT DRIVE
NEW PORT RICHEY, FL 34654

New Principal Place of Business:

Current Mailing Address:

8606 GOVERNMENT DRIVE
NEW PORT RICHEY, FL 34654

New Mailing Address:

FEI Number: 27-0759984 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

LUCAS, JEFF ESQ.
8606 GOVERNMENT DRIVE
NEW PORT RICHEY, FL 34654 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:

Title: PD
Name: WHITE, BOB
Address: 13901 WHITBY DRIVE
City-St-Zip: HUDSON, FL 34667

Title: VP
Name: BEAL, BILL
Address: 12801 HICKS ROAD
City-St-Zip: HUDSON, FL 34669

Title: T
Name: HOWELLS, TIM
Address: 11905 OAK TRIAL WAY
City-St-Zip: PORT RICHEY, FL 34668

Title: S
Name: REGA, VINNIE
Address: 8340-3 HIGHPOINT CIRCLE
City-St-Zip: PORT RICHEY, FL 34668

Title: D
Name: FOSTER, SHAWN
Address: 8700 CITIZENS DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: D
Name: LUCAS, JEFF
Address: 8606 GOVERNMENT DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34654

I hereby 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 all other like empowered.

SIGNATURE: JEFF LUCAS

D

05/03/2010

Electronic Signature of Signing Officer or Director

Date