

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10266

**FILED**  
**Apr 07, 2012**  
**Secretary of State**

**Entity Name:** SANDWEDGE VILLAS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

733 CARPENTERS WAY  
P. O. BOX 91423  
LAKELAND, FL 338048423

**New Principal Place of Business:**

733 CARPENTERS WAY  
SUITE 11  
LAKELAND, FL 33809

**Current Mailing Address:**

733 CARPENTERS WAY  
P. O. BOX 91423  
LAKELAND, FL 338048423

**New Mailing Address:**

733 CARPENTERS WAY  
SUITE 11  
LAKELAND, FL 33809

**FEI Number:** 59-2939651

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WRIGHT, MARY ANN  
733 CARPENTERS WAY  
SUITE 11  
LAKELAND, FL 33809 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: PD  
Name: WRIGHT, MARY ANN  
Address: 733 CARPENTERS WAY #11  
City-St-Zip: LAKELAND, FL 33809

Title: STD  
Name: TURNER, TAMALA  
Address: 733 CARPENTERS WAY #46  
City-St-Zip: LAKELAND, FL 33809

Title: D  
Name: GOMEZ, VICTOR  
Address: 733 CARPENTERS WAY #7  
City-St-Zip: LAKELAND, FL 33809

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: MARYANN WRIGHT

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04/07/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date