2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13350

FILED Feb 18, 2009 Secretary of State

Entity Name: SANDALWOOD MOBILE HOME COMMUNITY HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 5325 DIANTHUS ST ZEPHYRHILLS, FL 33541 LIS **Current Mailing Address: New Mailing Address:** 36055 BEGONIA AVENUE ZEPHYRHILLS, FL 33541 FEI Number: 59-2980015 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WALLER, CHARLES D P.A 38038 MÉRIDIAN AVENUE DADE CITY, FL 335261668 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition SCIUTO, LOUIS Name: Name: **5244 CROTON ST LOT 199** Address: Address: City-St-Zip: ZEPHYRHILLS, FL 33541 City-St-Zip: Title: () Delete Title: (X) Change () Addition OWENS, GEORGE Name: POWELL, ARLENE Name: Address: 36135 PRIMROSE LANE LOT 165 Address: 36042 BEGONIA LOT 19 City-St-Zip: ZEPHYRHILLS, FL 33541 City-St-Zip: ZEPHYRHILLS, FL 33541 Title: () Delete Title: SEC (X) Change () Addition TURBACUSKI, CORRAINE KING, KATHY Name: Name: 36116 ASTER AVE Address: Address: 5304 CROTON LOT 196 City-St-Zip: ZEPHYRHILLS, FL 33541 ZEPHYRHILLS, FL 33541 City-St-Zip: Title: TR () Delete Title: () Change () Addition Name: HUNTER, ELIZABETH Name: Address: 5322 IXORA STREET Address: City-St-Zip: ZEPHYRHILLS, FL 33541 City-St-Zip: Title: () Delete Title: () Change () Addition FARMER, HARRY Name: Name: 5347 IXORA LOT 39 Address: Address: City-St-Zip: ZEPHYRHILLS, FL 33541 City-St-Zip: Title: () Delete Title: (X) Change () Addition MCLAUGHLIN, MARLA BRADLEY, GORDON Name: Name: Address: 36036 BEGONIA LOT 20 Address: 36046 ASTER LOT 70 ZEPHYRHILLS, FL 33541 ZEPHYRHILLS, FL 33541 City-St-Zip: City-St-Zip:

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: ELIZABETH HUNTER TR 02/18/2009