## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17361

FILED Apr 23, 2009 Secretary of State

Entity Nar	me: SANDAL	S CONDOMINIUM ASSOCIAT	ION, INC.		
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
156 BROC	TH MEHARRY OKMEADE DR. RGH, PA 1523	7			
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
156 BROC	TH MEHARRY DKMEADE DR. RGH, PA 1523	7			
FEI Number:	: 59-2734929	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
MEHARRY, JUDITH SANDALS CONDO ASSOC 3397 WEST GULF DRIVE UNIT "B" SANIBEL, FL 33957 US			3397 WEST GULF D	MEHARRY, JUDITH SANDALS CONDO ASSOC 3397 WEST GULF DRIVE UNIT SANIBEL, FL 33957 US	
	named entity : e of Florida.	submits this statement for the p	ourpose of changing its register	ed office or registered agent, or both,	
SIGNATURE:				04/23/2009	
	Electror	nic Signature of Registered Ag	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD ( ) MENKE, JOANI 1097 RAVINE F WORTHINGTO	RIDGE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	MCNAMARA, N	OS CLUB CIRCLE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	SD ( ) KREDER, LAUI 109 CANNON F WILTON, CT 0	RD.	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	TD ( ) MEAHARRY, JU 156 BROOKME PITTSBURG, P	EADE DR.	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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: JUDITH MEHARRY TD 04/23/2009